

50
Reasons
FOR
BEING
A
HOMOEOPATH
Sixth Edition

J. Compton Burnett

Homœopathic Treatment

OR

FIFTY REASONS FOR BEING A HOMŒOPATH

By

J. COMPTON BURNETT, M.D.

*With a Preface and Introduction
by a Physician*

SIXTH EDITION

It may sound oddly, but it is true, in many cases, that if men had learned less, their way to knowledge would be shorter and easier. It is indeed shorter and easier to proceed from ignorance to knowledge, than from error. They who are in the last must unlearn before they can learn to any good purpose : and the first part of this double task is not, in many respects, the least difficult ; for which reason it is seldom undertaken.

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PREFACE AND INTRODUCTION

BY A PHYSICIAN

SIXTH EDITION

THIS wonderful little book has found its way to the public in five editions. The opportunity has now been taken to arrange the index better and to summarize the medical controversy which caused the book to be undertaken. It was given, perhaps, too much prominence in former issues.

Briefly, the author, Dr. J. Compton Burnett, was born in the year 1840. He graduated with honours from an orthodox medical school. While he was working as a house physician his original mind was occupied in devising better curative measures for the patients admitted. Here he relates his experiences and his conversion from allopathic drugging to the homœopathic curative methods mentioned in the various cases.

But the book, containing his Fifty Reasons for being a Homœopath, was undertaken for a specific object.

About 1888, Dr. Compton Burnett had deservedly made his way in medical circles as a well-known London practitioner with the appointment as Physician to the London Homœopathic Hospital. By chance (but really on the purpose of his host "a genial Member of Parliament") Dr. Burnett met his host's young nephew at dinner. This young man, "Dr. T.A.K.", had recently returned from Europe after a tour of the medical universities before going into medical practice in England. His uncle believed in Homœopathy and he wished his nephew to interest himself in it rather than the allopathic school of treatment and thought. There is no doubt he contrived the meeting for that purpose.

Dr. Burnett found the nephew "as full of scholastic conceit as an egg is full of meat", and on young Dr. T.A.K. calling him a "quack", left the house in anger. In the result, however, he agreed to accept the challenge thrown out in letters passing between himself and the young doctor and, in course of time, gathered the cases together

which you will read in the pages of this book. That alone is a tribute to Dr. Compton Burnett's character and convictions.

We can imagine Dr. T. A. K.'s obstinacy must have been irritating to the older and prosperous successful London practitioner but only occasionally does some acerbity become noticeable in the argument ; when the young man, like so many other doubters, refuses to read the homœopathic books recommended or to take any steps to verify Dr. Burnett's methods. There is ample excuse for the terms used.

Not only do the cases completely *convince*, but even in the searching light of fifty years' further enquiry these homœopathic treatments sparkle with Truth. They have turned many a thinking man towards a better line of thought.

In Burnett's time homœopathic physicians practised under great professional drawbacks, for it was not until long after his death, in 1901, that homœopathic science and the medical men who had the courage to explore it were recognized by the State as equal in all respects to their fellows in the Medicinal arts.

Having been asked to preface this edition I have naturally examined the cases again with the greatest interest. Even if Dr. Compton Burnett's career was not so authenticated as it is, the perusal of these cases, the knowledge of homœopathic principles shown in them, the care and skill used in differentiating the right remedy for them, whether in serious cases or slight, no less than the literary style in which they are so logically explained to his sceptical and cynical antagonist, prove Dr. J. Compton Burnett's right to be considered one of the greatest medical pioneers of Homœopathy. He argues so reasonably. He cures so well.

His cases must convince any but the wilfully blind. They seem to cover exactly the discomforts and diseases which the majority of practitioners encounter in their usual work.

It is an inspiration to examine and enjoy the manner in which they were met and overcome. All practitioners, all Homœopathists, will gain something *valuable* from a careful perusal of this book. With the aid of a modern *Materia Medica* greater scope is obtainable in developing the cures so skilfully obtained by this old Master of our art.

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FIFTY REASONS FOR BEING A HOMŒOPATH

I

A NUMBER of years ago, on a dull, dreary afternoon, which I had partly occupied at B— Hospital with writing death certificates, I suddenly rose and felt something come over me for the fiftieth time at that period. I hardly knew what, but it grew essentially out of my unsatisfactory clinical results. I had been an enthusiastic student of medicine originally, but an arrantly sceptic professor quite knocked the bottom out of all my faith in physic, while overmuch hospital work and responsibilities, grave beyond my age and experience, had squeezed a good deal of the enthusiasm out of me. After pacing up and down the surgery, I threw myself back into my chair and dreamily thought myself back to the green fields and the early bird's-nesting and fishing days of my childhood. Just then a corpse was carried by the surgery window, and I turned to the old dispenser and enquired in a petulant tone, "Tim, who's that dead now?" "Little Georgie, Sir."

Now little Georgie was a waif who belonged to nobody, and we had liked him and had kept him about in odd beds, as one might keep a pet animal. Everybody liked little Georgie; the most hardened old pauper would do him a good turn, and no one was ever more truly regretted than he.

It all came about in this way: One day I wanted a bed for an acute case, and I ordered little Georgie out of his bed in a warm, snug corner to another that was in front of a cold window; he went to it, caught cold, had pleurisy, and Tim's reply gives the result.

Said I to myself: If I could only have stopped the initial fever that followed the chill by the window, Georgie had probably lived. But three medical men besides myself had treated Georgie—all in unison—and all hospital men; still pleurisy followed the febricula, dropsy followed the pleurisy, and poor little Georgie died. Old Tim was a hardened man and I never saw him show any feeling or sentiment of any kind, or regret anybody's

death, but I verily believe he was very near dropping just one wee tear over Georgie's memory, for I noticed that his attention was needlessly and unwontedly fixed on the surface of the bottles he was washing. Be that as it may, Georgie was no more, and I FELT SURE THAT HE NEED NOT HAVE DIED, and this consciousness nearly pressed me down into the earth.

That evening a medical friend from the Royal Infirmary turned up to dinner with me, and I told him of my trouble and of my half determination to go to America and turn farmer: at least I should be able to lead a wholesome natural life.

He persuaded me to study Homœopathy first, and refute it, or, if apparently true, to try it in the hospital.

After many doubts and fears—very much as if I were contemplating a crime—I procured Hughes's *Pharmacodynamics* and *Therapeutics*, which my friend said were a good introduction to Homœopathy.

I mastered their main points in a week or two, and came from a consideration of these to the conclusion either that Homœopathy was a very grand thing indeed, or this Dr. Hughes must be a very big . . . No, the word is unparliamentary. You don't like the word—? Well, I do, it expresses my meaning to a T; on such an important subject there is for me no middle way. It must be either good clear God's truth, or black lying. A fool the man could not possibly be, since it would be quite impossible for a fool to write the books. And as he seemed to speak so eloquently from a noble soul, it lifted me right out of the slough of despond—for a little while, but then came a reaction: had I not often tried vaunted specifics and plans of treatment, and been direfully disappointed? So my old scepticism took possession of me. "What," said I, "can such things be?" No, impossible. I had been nurtured in the schools, and had there been taught by good men and true that Homœopathy was therapeutic Nihilism. No, I could not be a homœopath; I would try the thing at the bedside, prove it to be a lying sham, and expose it to an admiring profession!

I was full of febricula on account of Georgie's fate, so studied the say of the homœopaths thereon, and found that they claimed to cut short simple fever with *Aconite*. Ah, thought I, if that be true, *Aconite* would have saved little Georgie if given in time at the very onset.

Well, feverish colds and chills were common enough just then, and I had, moreover, a ward where children thus taken ill were put till their diseases had declared themselves, and then they were drafted off to the various wards, for that purpose provided, with pneumonia, pleurisy, rheumatism, gastritis, measles, as the case might be.

I had some of Fleming's *Tincture of Aconite* in my surgery, and of this I put a few drops into a large bottle of water and gave it to the nurse of said children's ward, with instructions to administer of it to all the cases on the one side of the ward as soon as they were brought in. Those on the other side were not to have the *Aconitic* solution, but were to be treated in the authorized orthodox way, as was theretofore customary. At my next morning visit I found nearly all the youngsters on the *Aconite* side feverless, and mostly at play in their beds. But one had the measles, and had to be sent to the proper ward. I found *Aconite* did not cure measles. The others remained a day or two, and were then returned whence they had originally come.

Those on the non-*Aconite* orthodox side were worse, or about the same and had to be sent into hospital—mostly with localized inflammations, or catarrhs, measles, etc.

And so it went on day after day, day after day: those that got *Aconite* were generally convalescent in twenty-four or forty-eight hours, except in the comparatively seldom cases where the seemingly simple chill was the prodromal stage of a specific disease such as measles, scarlatina, rheumatic fever: these were barely influenced by the *Aconite*. But the great bulk of the cases were all genuine chills, and the *Aconite* cured the greater part right off, though the little folks were usually pale, and had perspired, as I subsequently learned, needlessly much.

I had told the nurse nothing about the contents of my big bottle, but she soon baptized it "Dr. Burnett's Fever Bottle."

For a little while I was simply dumbfounded, and I spent much of my nights studying Homœopathy: I had no time during the day.

One day I was unable to go my usual rounds through the wards; in fact, I think I was absent two days—from Saturday till Tuesday—and on entering the said children's ward the next time in the early morning, the nurse seemed rather quiet, and informed me, with a certain

forced dutifulness that *all* the cases might, she thought, be dismissed.

"Indeed," said I, "how's that?"

"Well, doctor, as you did not come round on Sunday and yesterday, I gave your fever medicine to them all; and indeed, I had not the heart to see you go on with your cruel experiments any longer: you are like all the young doctors that come here—you are only trying experiments!"

I merely said "Very well, nurse; give the medicine in future to all that come in." This was done till I left the place, and the result of this *Aconite* medication for chills and febricula was usually rapid defervescence, followed by convalescence. But when the stomach was much involved, I at times found the *Aconite* useless, unless vomiting occurred, and so in such cases I administered a mild emetic, whereupon defervescence at once set in, and, though a homœopath now for a good many years, I still think a mild emetic the right treatment when the stomach is laden and cannot unburden itself by natural vomit.

But still this is only by the way: I enter into all these preliminary, incidental and concomitant circumstances merely to put you on the same ground whereon I myself stand; they are not essential, for they only lead to this: *Aconitum in febricula was, and is, my first reason for being a homœopath.*

Have you as good a reason for being a "regular"?

II

Ah! my good fellow, I thought you would say that you also use *Aconite* for fever, and that therefore it is not necessarily Homœopathy. But do you not know of a certain French gentleman who spoke prose all his life without knowing it?

A man that gives *Aconite* for febricula is a homœopath *malgré lui*. But to my second reason.

When I was a lad I had pleurisy of the left side, and, with the help of a village apothecary, and half-a-hogshead of mixture, nearly died, though not quite. From that time on I had a dull, uneasy sensation in my side, about which I consulted many eminent physicians in various parts of Europe, but no one could help me. All agreed that it was an old adhesive something between the visceral and costal layers of the pleura, *but no one of my many*

eminent advisers could cure it. And yet my faith in them was big enough to remove mountains. So faith as a remedy did no good.

When orthodox medicine proved unhelpful, I went to the hydropaths (they were called "quacks" then!) and had it hot, and cold, and long; but they also did me no good. Packs cold, and the reverse; cold compresses worn for months together; sleeping in wet sheets; no end of sweatings—Turkish and Russian—all left my old pleuritic trouble *in statu quo ante*.

The grape cure; the bread-and-wine cure, did no better. Nor did diet and change help me.

However, when I was studying what the peculiar people called homœopaths have to say about their *Bryonia alba*, and its affinity for serous membranes, I—what?—abused them and called them quacks? No!—I bought some *Bryonia alba*, and took it as they recommended, and in a fortnight my side was well, and has never troubled me since!

There, friend, that is my second reason for being a homœopath, and when I cease to be grateful to dear old Hahnemann for his *Bryonia*, may my old pleural trouble return to remind me of the truth of his teaching.

What you and the world in general may think of it I care not one straw: I speak well of the bridge that carried *me* over.

For my part, I make but one demand of medicine, and one only, viz. *that it shall cure!* The pathy that will cure is the pathy for me. For of your fairest pathy I can but say—

What care I how fair she be,
If she be not fair to *me*?

III

You can have what opinion you like of my old pleuritis affection: I had the wretched thing till I took *Bryonia*, and I have never had it since. Myself, I am sweetly content with my second reason for being a homœopath. I never said the remedy was first used by the homœopaths; that is not of the essence of my proposition.

Since going over into the homœopathic camp, I have often had to treat pleurisy: that you will not find it difficult to believe. *Aconite* and *Bryonia* are the big

guns of the homœopaths for pleurisy, but I will remark, as the outcome of my own experience, that it is only in what I would call

PLEURITIS RHEUMATICA

that they really hit the mark. Let me relate such a case to you as my third reason for being a homœopath.

Some years since I was suddenly summoned to the suburban house of a city merchant, who had caught a chill two evenings before on returning from a political meeting. When I arrived, an exquisite case of pleurisy, *pleuritis rheumatica*, presented itself.

The gentleman's wife informed me that she was much exercised in her mind, as many friends had strongly urged her not to have Homœopathy in such a serious case. All very well, said they, perhaps, for women and children, but she surely was not going to risk her dear husband's life in the hands of a homœopathic practitioner? No, she would have Dr. X., who lived near by. But though, as a rule, *L'homme propose et la femme dispose*, in this case it was the other way about. The husband flatly refused any other than homœopathic treatment, and hence my presence. He was in a raging fever and much pain, and merely moaned, "Doctor, give me relief from this pain, and procure me some sleep."

I gave *Aconite* and *Bryonia*—strong.

Next day he was already a little round the corner, and not in much pain, unless he incautiously turned. "Doctor," said he, "my friend Mr. — in — road over yonder, has, I am told, something of the same thing as I have, only more in the shoulder, and he has sent to me to beg me to give you up, and have his medical man, who lives near by, and who is considered a very clever man—what am I to say?" I replied, "Tell him from me that I shall have you well in your city office in a few days at work, and that on your way home from the city you may call, and you will still find him ill, and then you can tell him your experience, and compare notes!"

And so it happened, in a few days—I do not remember the exact number—my patient went to his city office, did a small amount of work, and on returning home called on or sent to his said friend, who was still in great pain, and remained so for some time.

IV

Your note would infer that I was not dealing in my last letter with a case of true pleurisy.

Given a man who had pleurisy himself twice; who laboured twelve weeks in bed therewith; who went about all his student life with a painful sequel of pleurisy; who read all he could find in literature on pleurisy; who listened to lectures by Skoda on pleurisy for weeks

together with personal interest; who saw scores of cases of pleurisy while walking the hospitals; who was, as it happened, examined at his "final" on pleurisy; and who, in his own subsequent practice, has treated very many cases of pleurisy—I am that man!

Well, now I must give you my fourth reason for being a homœopath. The gentleman referred to in my last letter (my patient's friend), after he got over his acute sufferings went to a specialist for gout, but was still so stiffened in his shoulder and side that he was not able to do his office duty, and after remaining faithfully under his own doctor for a further period and still not getting well, finally—What? Came to me! And what next? *Bryonia alba*, *Chelidonium majus*, and *Sulphur*, cured him in a few weeks.

It seems to me that *Aconite* and *Bryonia* alone, if well studied and rightly used, would convert the whole world to Homœopathy, at least I see no escape for any honest unprejudiced man.

But prejudice is well-nigh almighty. As Bolingbroke says "It may sound oddly, but it is true, in many cases, that if men had learned less, their way to knowledge would be shorter and easier. It is, indeed, shorter and easier to proceed from ignorance to knowledge than from error. They who are in the last must unlearn before they can learn to any good purpose; and the first part of this double task is not in many respects the least difficult, for which reason it is seldom undertaken."

Did you understand anything about Homœopathy I would explain to you why I gave the *Bryonia*, why it was followed by *Chelidonium*, and why *Sulphur* had to be interposed; as you are, however, ignorant, you must take it empirically.

V

I leave you to study the wider therapeutic bearings of *Aconite* in common feverishness and as a preventive of inflammatory localizings, and also the specific elective affinity of the white *Bryonia* for the serous membranes, as exemplified in my own case, as well as in the other two; I did not promise you didactic lectures on the various points I bring forward, but only my Fifty Reasons. So now for my fifth: it is this—Homœopathy lifts me at one

stroke from the dependent position of a groping journeyman healer of disease to the proud position of a master of the healing art. Let me exemplify by quoting almost in full a case I once published, under this heading :—

ON THE USE OF CHLORAL HYDRATE IN LETHARGIC
SOMNOLENCY

Those who have watched *old* chloral-eaters may have noticed that they slowly get lethargic, somnolent, and listless. Towards the end of the chapter of chronic chloralism there is a condition of fatty degeneration of a slow, lazy type, and the very mode of death seems peculiar. I have seen a case where the subject of chronic chloralism lay for days a-dying ; she was for several days so that it was very difficult to determine whether she was dead or not.

Occasionally one comes across a remarkable case of somnolence, and then the narcotics are to be thought of by the therapist.

I will shortly relate two such cases from my own practice.

No. 1. A lady about forty-five years of age, stout, fresh-looking and the mother of a family, was the subject of remark of her friends, on account of her lethargy and sleepiness. Her weakness was such that even crossing the street was almost impossible ; the weakness was peculiarly lethargic, a kind of listless heaviness. She was almost constantly asleep ; she would get up in the morning after a good night's rest and, even while dressing, she seemed compelled to sit down, and no sooner seated but she would fall asleep. This state of things went on for weeks and months, and her allopathic adviser did his best in vain. After she came under my care I tried first *Arnica* and then *Opium*, with but indifferent success, when all at once I bethought me of the great similarity of the case before me to that of a confirmed old chloral-eater of my clientele.

Chloral in a low dilution cured my patient, and she again became brisk, active and wide awake.

No. 2. An elderly lady came under my care on April 21st, 1881, for lethargy, languor, and somnolence.

R. Trit. 2x *Chloral hydrat.*, 6 grains in water every three hours.

May 7th. Under this date I find these notes in my case book : " Feels a different creature ; vastly improved ; less lethargic, and decidedly less languid."

She then got the third decimal trituration in lieu of the second, and only two doses a day, and then needed no further treatment, as she subsequently informed me when calling with her husband.

Now you can see what I mean : I had before me cases that would not readily fit into any nosological *cadre*, and

yet I was enabled to treat the case *en maitre*. This is therapeutic independence which I love, and affords, as I submit, a very sound reason indeed for being a homœopath.

Had I not so many more reasons to give I should very much like to dilate on this transcendental advantage of Homœopathy : its law is a guide in the darkest disease ; of this more in my next.

VI

What I mean in my fifth reason requires to be insisted upon a little more, that you may perceive my meaning the more clearly. I said Homœopathy raises one from the dependent position of a journeyman therapist to that of a master.

E.g.—Some years since, as you may perhaps know, a drug called *Cundurango* came up in your school as a cure for cancer, much as *Chian turpentine* did subsequently, and, like it, had its little day, and then passed out of sight.

Cundurango, thought I, will certainly only cure one variety of cancer, not all. How are we to know which ? The clinical records of *Cundurango* showed that it really has genuine curative power over some cases of cancer, particularly of the stomach. Hahnemann taught that the true way to define the curative sphere of a drug is to give it to healthy people, to see what it would do to them.

I procured some of the *Cundurango* bark, made an infusion, and drank quantities of it. You will find my report on the subject in Allen's *Encyclopædia of Pure Materia Medica*. Well, I found that it causes (*inter alia*) cracks in the angles of the mouth.

Subsequently I had to treat a case of cancer of the left breast in a middle-aged woman, but patient had *also a deep crack in the angle of her mouth* on the left side, with thick indurated edges, probably of an epitheliomatous nature. I think you would have agreed with the diagnosis had you seen the case. I therefore reasoned thus : We know empirically that *Cundurango* can cure some cases of cancer ; I now know from the direct experiment on myself that it causes the angles of the mouth to crack ; the homœopaths maintain that likes cures likes, *ergo*,

Cundurango ought to be the curative agent in this case.

The patient took a homœopathic preparation of the remedy steadily for about three years, with gradual, slow amelioration, and eventual perfect cure. Since then eight years have elapsed, and she is still in excellent health. I think it must be manifest that, had it not been for Homœopathy, this cure could not have been wrought, and patient must long since have died of the dire disease.

Therefore, please accept this as my sixth reason for being a homœopath. And, learned, brother, what a proud position, too! Of course, it is not "regular". Alas! that it is *not*.

VII

This shall also be in further elucidation of my contention that Homœopathy turns the groping, bungling treater of disease into a master of the healing art.

Ever since the year 1878 I have been in the habit of using *Vanadium* as a remedy in a class of cases that, outside of Homœopathy, you cannot touch—I mean in certain cases of atheroma of the arteries, and fatty degeneration. I had been in the habit of using *Phosphorus*, *Antimony*, *Arsenic*, and the like, but was not satisfied with my result in certain cases: nothing satisfies me but a cure. So I went farther afield, and thought I had found what I wanted in *Vanadium*, whose physiological effects I studied in the *Proceedings of the Royal Society*. I got the differential points from an article in the *Journal of Physiology* by Mr. G. F. Dowdeswell entitled "On the Structural Changes which are Produced in the Liver under the Influence of the Salts of Vanadium." In a word, let me say that it consists in true cell destruction, the pigment escaping, the liver being hit hardest. I had a case on hand of fatty liver, atheroma of the arteries, much pain corresponding to the course of the basilar artery, large deeply pigmented patches on forehead, profound adynamia, and so forth.

Well, my patient was then over seventy, and was very clearly breaking up and going to pass the big bourne whence no man returneth. Thanks to the use of *Vanadium* (I used the soluble ammonium salt) in homœopathic

preparation, chosen according to the homœopathic law, that lady got quite well, and remains so, being now hard upon eighty years of age, and hale and hearty.

This is what I call being a master of the art of healing, and that you may truly realize the entire independence of my proceeding, I may tell you that thus far *Vanadium* (so far as I know) has never even now been used in medicine at all, except by myself.

Of course, as you are a "regular", you would not so far have forgotten your dignity as to go in quest of a remedy for your case, holding on humbly and hopefully to the Hahnemannian law.

Please allow the now by me clinically proved homœopathicity of *Vanadium* to a certain form of fatty decay stand as my seventh reason for being a homœopath.

My other *Vanadium* cases I will not trouble you with—they only prove the same point; besides, I have still forty-three reasons to give you.

VIII

A lady living not far from your uncle's, in Kensington, came to me on June 5th, 1882, with a sore, gnawing pain in her left side, the pain being at times sharp and darting, and seated just under the ribs, in the region of the spleen: worse at night when she got warm in bed. Concomitantly herewith the left eye is involved: its *puncta lachrymalia* are very red. This is a comparatively simple case of disease, yet withal very painful, and patient came to me to be cured. I am sure as a "regular" this case would completely baffle anyone. Without a scientific law to guide you, you would not be able to tackle the case curatively at all. It offered no particular difficulty to me, and I cured it with an essence of the common European walnut! Fancy the walnut tree for such a case! We call it *Juglans regia*, and I gave five drops of the first centesimal dilution in water three times a day. Would you like to know the scientific "why" of this case? Only Homœopathy and the mundane doings of the late Clotar Müller can tell you.

Here again, you see how the law of similars gives executive potentiality to one's knowledge of drug physiology and, moreover, affords me my eighth reason for *not* being a "regular".

IX

You object to my "jeering, offensive tone". May I remind you, my "regular" friend, that you began the "jeering"? At your uncle's you plumed yourself upon being a "regular", and thought you were looking down from a mighty height upon the homœopaths! You insisted upon having my fifty reasons, and I am sending them as fast as I can, and if I parenthetically do a little jeering, you will please remember that I have the most absolutely unspeakable contempt for your ignorance, from the top of which you had the brazen effrontery to call the homœopaths quacks! You, the grossly ignorant, prejudiced "regular", call flippantly upon me to justify my professional position. When I speak of your ignorance I mean your ignorance of the art of healing; of other kinds of knowledge I know you are full.

I have given you a case of pain in the left hypochondrium cured by *Juglans regia*; not many weeks after that case was cured, as stated, a young lady came to consult me in regard to a very similar pain, but hers was of the *right* side, at the bottom of the right lung. She had had it for three months, and was pulled down by it a good deal, having become weak and anæmic.

Chelidonium majus 1, five drops in water night and morning, cured it specifically in just a fortnight. I should like to discuss with you the reason why I gave *Juglans regia* in the one case of pain in the one side, and *Chelidonium majus* in the other; but I have not the time, so this must end my account of my ninth reason.

X

You are quite mistaken in saying that what rendered me, after my "manner of speech", a master of the healing art, is limited in its application. That is just what it is *not*, else where is the mastership? Getting a firm grip of the homœopathic law affords me a *guide under almost all circumstances*. Let me further exemplify my meaning by adducing a case of—

CHRONIC HICCUGH

To begin with, if you have no experience with really bad cases of hiccough, ask your older partner, and he will

tell you that they are very troublesome at times, and by no means easy to cure. And hiccough is again one of those cases that do not fit easily into any nosological system.

In the early part of 1883, a young lady was brought to me suffering from a number of morbid symptoms, the most promising of which was *Singultus* (hiccough). She would get it in attacks lasting about half an hour each, and of these there were generally four a day. In view of the concomitants—emansion of the menses, leucorrhœa, thirst, much saliva in the mouth—I considered that the hiccough was reflected from the uterus. You know something of the views I hold on vaccination and the theory of vaccinosis, which I have elsewhere sought to establish and defend. Well, I proceeded on these lines and gave *Thuja*, but it did no good. I followed with *Sepia*, which is a classic remedy with the homœopaths for leucorrhœa, but it also did not help. What did I do? I went to the law of Homœopathy and to the prophet Hahnemann! Now my patient was *thirsty*; her *tongue was coated*; she had *nausea*; her *mouth filled with fluid*; she had *headache*; she *yawned* a good deal; she had *hiccough*; she complained of great *weakness*, and of *fatigue in all her limbs*; and altogether her symptoms were very much like those of *Cyclamen*, as given in Hahnemann's *Materia Medica Pura*, and THEREFORE if the old seer's notion of similitudes was worth anything, *Cyclamen* ought to cure my patient, and so it did. The third decimal nearly cured her, but not quite; and so I went down to the second decimal when the menses appeared. But the second decimal dilution did not seem to act so well as the previously used third, and hence I harked back to the third. Then, as the hiccough was *not quite* well, I went down to the first decimal, and then for the same reason shot up to the thirtieth centesimal, when—repeat it only in a whisper to your friends—no more remedies were needed for the hiccough!

So please accept as my tenth reason for being a homœopath the fact that *with its aid I can cure hiccough* safely and pleasantly: this time the cure was wrought with *Cyclamen*.

XI

I would fain beg you to allow me to give you as my eleventh reason for being a homœopath also a most singular case of hiccough. It has already been published in my *Natrum muriaticum*, whence I will transcribe it.

CASE. XI. A clergyman's wife of about 50 years of age consulted me on February 20th, 1878, complaining of severe dyspepsia with other symptoms of *Natrum muriaticum*. My visit was a hurried one, so I did not enter very fully into the case. *Nat. mur.* 6 trit., vj grains in water twice a day was the prescription; it cured in three days these symptoms: "*Hiccough* occurring

morning; noon and night for at least ten years, which was brought on by quinine; it was not a hiccough that made much noise, but 'shook the body to the ground'; it used to last about ten minutes, and was 'very distressing.'

"How do you know that the hiccough was really produced by quinine?" I enquired. She answered: "At three separate times in my life I have taken quinine for tic of the right side of my face, and I got hiccough each time; the first and second time it gradually went off, but the third time it did not; when the late Dr. Hynde prescribed it I said, do not give me quinine as it always gives me hiccough, but he would give it to me; I took it, and it gave me the hiccough, which lasted until I took your powders; it is more than ten years ago since I took the quinine."

The cure of the hiccough has proved permanent.

This patient is a most truthful Christian woman, and her statement is beyond question.

She has been a homœopath for many years, and my patient off and on for more than three years, during which time I have had to treat her for chronic sore throat, vertigo, palpitation, and at one time for great depression of spirits.

She had also previously mentioned her hiccough incidentally, but I had forgotten all about it, and on this occasion she did not even mention it; so far as the hiccough goes the cure was . . . a pure fluke! But it set me a-thinking about the Hahnemannian doctrine of drug dynamization for the thousandth time, and has seriously shaken my *disbelief* in it.

Hiccough is a known effect of *Chininum sulfuricum*: Allen's *Encyclopædia*, Vol. III, p. 226, symptoms 370 and 379.

We note from this case that .

1. The effects of quinine, given for tic in medicinal doses to a lady, may last for more than ten years: that:

2. *Natrum muriaticum* in the sixth trituration antidotes this effect of quinine, while:

3. The same substance in its ordinary form, viz., common salt, does *not* antidote it even when taken daily in various quantities and in various forms for ten years. Inasmuch, then, as the crude substance fails to do what, the trituated substance promptly effects, it follows, therefore, that:

4. Trituration does so alter a substance that it thereby acquires a totally new power, and consequently that:

5. The Hahnemannian doctrine of drug dynamization is no myth, but a fact in Nature capable of scientific experimental proof, and, inasmuch as the crude substance was taken daily for many years in almost every conceivable dose, in all kinds of solutions of the most varied strength, it results:

6. and lastly. That the Hahnemannian method of preparing drugs for remedial purposes is not a mere dilution, or attenuation, but a *positively power-evolving or power-producing process*, viz. a true *potentization or dynamization*.

This case is probably as good a one as we may ever expect to get, and it might here fitly close the subject as far as its simple demonstration is concerned, but I have others in my casebook, both corroborating it and presenting new features.

Before leaving this Case XI let us reflect for a moment on the certainly immense number of modifying and perturbing influences this lady has been subject to during those ten years, as well as living at the seaside, and including the daily use of salt, and yet her hiccough persisted until dynamized salt was given.

Before coming to these conclusions I exhausted all my ingenuity in trying to explain it away, and that backed by no small amount of scepticism, not to believe it than to believe it.

I am thus in a dilemma: either I must believe in the doctrine of drug dynamization, or disbelieve the most incontrovertible evidence of facts, which is the province of the demented.

Or canst thou, critical reader, being more ingenious and more sceptical than I, help me out of the dilemma? Fain would I believe thou canst, for this doctrine of drug dynamization seems to take away firm material ground from under one's feet, and leaves one standing in the air.

This is rather a long account of a case of hiccough, but it taught me much, and that must be my excuse for not curtailing it.

XII

As you have not acknowledged my last communication, I will inflict a third case of hiccough upon you, and that will be my twelfth reason for being a homœopath.

On March 29th, 1887, a young lady of 10 was brought to me, her mother complaining that she suffered from bloodlessness, languor, biliousness, sore throat, nausea, faintness, frontal headaches, matutinal lassitude, poor memory, sour breath, risings in the throat, hiccough, white and scant motions, pain in the left side on going up hill. I found an endocardial bruit, best heard

at the base, and very notable enlargement of the spleen. Patient could not stand cold, had been only once vaccinated, had had varicella and measles.

You know I consider vaccination a disease, and I have ventured to call it vaccinosis, and have written a small book on the subject ; however, I am not concerned with that theme here, but with the greater subject of Homœopathy, which leads to the same prescription as my theory of vaccinosis. *Thuja occidentalis* 30 in infrequent doses cured the hiccough, reduced the spleen by about one-half, oddly enough, the endocardial bruit also disappeared. The cure of the hiccough by *Thuja* is, however, the point I desire to call your attention to more particularly. Now note that I have offered you three cases of hiccough, one cured by *Cyclamen europæum*, the second by *Natrum muriaticum*, and the last one by *Thuja occidentalis* : this diversity of remedial measures for a symptom such as hiccough exemplifies alike the spirit of Homœopathy and the immensity of its mastership over disease. Nevertheless, to an outsider who does not understand Homœopathy, this diversity of remedial measures constitutes a great stumbling block, and has prevented many able, conscientious investigators from understanding it, and yet this is the strength of the system, rendering, however, its practice disgustingly difficult. All nature is our pharmacopœia—that is, for any homœopath who has grasped the subject, and who has learned to walk without crutches, and who is WILLING TO WORK ! And although I have thus narrated three cases of hiccough cured by as many different homœopathic remedies, still if you were to ask me what remedy I would recommend you to try for hiccough, I should only be able to say, “that remedy (not necessarily either of my three) which can be proved to be pathogenetically like the to-be-cured case of hiccough,” I fear I am firing over your head !

XIII

Quite so ; I did not maintain that hiccough was a mortal malady ; what I do maintain is that it is often very troublesome, and that Homœopathy can cure it pleasantly and safely. More than a safe and pleasant cure I ask of no system of medicine. But let me pass to my thirteenth reason, viz. :

CURE OF APHONIA BY *Arnica*

A well-known soprano singer came to me with aphonia : the throat was what is commonly called follicular and congested. You may have heard that the homœopaths think a good deal of *Arnica* for the ill effect of bruises, hurts, sprains, and the like ; in fact, for trauma in general. Well, after using numerous remedies in vain, it slowly became manifest to me that the aphonia in question was from an overstrained state of the vocal chords. Moreover, patient had a small pustule on the nape, and mattery pimples on the skin.

Arnica cured the case, affording in its physiological action symptoms similar to it.

You will perhaps say that this aphonia case is also not a mortal malady. Will you once for all disabuse your mind of the very vulgar professional and popular error, according to which the homœopaths are said to claim to cure the incurable ! Just note, at least for your own information, that the homœopaths make no such claim ; what they say is this : Homœopathy cures what can be cured much better than any other system of medicine hitherto made known to the world. The homœopaths do not maintain that other systems are valueless, or that the homœopathic system is faultless, only that thus far in the art-treatment of disease by remedies, Homœopathy, by very long odds, beats all the records. Do you see ?

Be that as it may, I trust that curing an old case of singer's aphonia with *Arnica* is a fairly sound reason for being a homœopath ; any way it is my thirteenth.

P.S.—When I say that Homœopathy does not claim to cure the incurable, that leaves the question of curability an open one ; Homœopathy does not accept anything as incurable because certain physicians who are “regular” declare it to be so. Incapacity to cure does not render the uncured incurable. Kindly take a mental note of this, because what you “regulars” consider incurable may, or may not, be so considered by the homœopaths. My old pleuritis trouble was declared and proved to be incurable by and for the entire faculty, and yet the *Bryonia alba* of the homœopaths cured it !

XIV

You "do not believe that *Arnica* is any good for injuries and, moreover, it is a poisonous drug, causing very dangerous, or, at least, very severe, erysipelas". I have nothing to do with your beliefs: clinical facts are what I am concerned with. I cured an old case of *aphonia* with *Arnica*, and an account of that I have sent you as my thirteenth reason for being an homœopath. Whether you believe in the anti-traumatic virtues of *Arnica* or not is your affair: I fearlessly affirm that your scepticism would not have cured it, anyhow.

Further, I did not deny that *Arnica* causes very severe and even dangerous erysipelas. Indeed, I know it well, and have seen it, and out of your own mouth will I take my fourteenth reason for being a homœopath.

OLD CASE OF ERYSIPELAS CURED BY *Arnica*

Some years since an eminent member of the Society of Friends wrote to me, stating that he had for a number of years been suffering from erysipelas of the face at odd intervals. I ordered him *Arnica* in a rather high dilution and in infrequent dose, and thereupon his erysipelas faded and came no more. Long afterwards he wrote me a very grateful letter, giving me much undue praise for having wit enough to see that the Almighty has His laws in therapeutics for the guidance of His poor, sick children.

I have it from you that *Arnica* causes erysipelas; I will not doubt your statement; you may now take it from me that *Arnica* cures erysipelas, and this I offer you as my fourteenth reason for being a homœopath. You know the bad character of *Arnica* in that it is apt to cause erysipelas; I tell you of its good fame, viz. that it possesses the power of curing erysipelas, and the intellectual link that completes the little chain is the law of likes that God put into the mind of one Samuel to explain to the world.

XV

You need not be so angry at my last reason; I did not make *Arnica* grow in the world; I did not endow it with the power of causing erysipelas; and I did not discover the therapeutic law in question; I just use this law in

order to cure my patients, even as I use the useful invention known as a spoon wherewith to partake of my broth. With me it is merely a means to an end; there is no hocus-pocus about it.

Just as I was writing you my last reason for being a homœopath, I was suddenly summoned by telegraph to a very severe case of quinsy. I hastened to the suffering damsel, and found that various remedies had been used in vain, and the patient was in great distress, having been for twelve hours unable to swallow even a few drops of fluid. Not even the juice of one grape would pass, and some operative interference seemed absolutely imperative. I gave five grains of the third centesimal trituration of a remedy you may not be acquainted with, but which the heterodox homœopaths quaintly call *Baryta carbonica*, and which is now generally known as the *Carbonate of Barium*. In about a dozen hours patient ate a basin of bread and milk. I have often cured quinsies before in the same way and I beg you to believe that the little trick has been done thousands of times by others, and though no clinical tip of mine, it nevertheless must serve you as my fifteenth reason—and not a bad one either, as said damsel would gratefully bear witness.

XVI

You remember my case of hiccough cured by *Natrum muriaticum*? Well, while my mind is still dwelling on this very wonderful remedy, I will adduce another cure by it as my sixteenth reason for being a homœopath. In it you may again note the expansiveness of the conception of similitudes, for this case grew out of the hiccough case:

John H., aged 29, seaman, came to me on April 21st, 1878, telling me that he had had fever and ague two or three times a day, with watery vomiting, in Calcutta, in September, 1877. Was in the Calcutta Hospital three weeks for it, and took emetics, quinine, and tonic. Left at the end of the three weeks cured; but before he was out of port the ague returned, or he got another, and he had a five-month voyage home to the port of Liverpool. During the first three months of this homeward voyage he had two, three, four and five attacks a week, and took a good deal of a powder from the captain, which, from his description, was probably *Cinchona* bark; then the fever left him, and the following conditions supervened, viz.: "Pain in right side under the ribs; cannot lie on right side; both calves very painful to touch,

they are hard and stiff ; left leg semiflexed, he cannot stretch it." In this condition he was two months at sea and two weeks ashore ; and in this condition he comes to me hobbling with the aid of a stick, and in great pain from the moving.

Urine muddy and red ; bowels regular ; skin tawny ; conjunctivæ yellow.

Drinks about three pints of beer daily. I recommended him not to alter his mode of life till he is cured, and then to drink less beer. The former part of the recommendation he followed, as I learned from his brother ; of the latter part I have no information.

The hiccough case bears directly on this one, as we have evidently to do with an ague suppressed with Cinchona. Therefore ordered *Nat. mur.*, 6 trit., six grains in water every four hours.

April 27th.—Pain in side and leg went away entirely in three days, and the water cleared at once ; but the pain returned on the fourth day in the left calf only, which to-day is red, painful, swelled, and pits. He walks without a stick.

Continue medicine.

May 4th.—Almost well ; feels only a very little pain in left calf when walking. Looks and feels quite well, and walked into room with perfect ease without any stick.

He thinks he had a cold shake a few nights ago. He continues to perspire every night ; ever since he got the ague the sheets have to be changed every night.

Continue medicine.

May 11th.—Quite well.

I will here urge you to make a profound study of salt in all its bearings ; but its being such a grand calorificant in refracted dose, and during this deadlock of ague and cinchona, will surely entitle it to be considered a very good reason for being a homœopath, since it cannot be so used on any other than homœopathic ground.

XVII

Not many years ago the daughter of a London alderman was suffering from fearful neuralgia of the face ; at intervals she had had it for years, and no trouble or expense had been spared in endeavouring to cure it. Their ordinary family adviser was a homœopath, but he had not managed to cure this neuralgia, notwithstanding several consultations with colleagues ; and other men of eminence had been consulted, but to no avail.

I found that the pain was worse in cold weather ; worse at the seaside ; better away from the sea—inland, i.e. not so frequent or severe, and when the pain came on the eyes watered. A pinch of the sixth trituration of *Natrum muriaticum* in water three times a day cured my young

patient in about three weeks ; and this anti-neuralgic action of *Nat. mur.* must be my seventeenth reason for being a homœopath.

XVIII

You ask how it then is that with all the merits which I claim for Homœopathy, its practitioners should be in "such a contemptible minority in the profession" ? I presume, being in the minority does not necessarily mean to be in the wrong.

I suppose you hold that the world moves ? There was a time when those who said so were in the minority, and not very far from the stake if they dared to aver their belief !

You personally, have devoted a good deal of attention to "diseases of the organs of circulation", and you plume yourself rather (so I gathered in conversation with you) on knowing just a little more than most people on the "forces that carry on the circulation of the blood"—eh ? Was not, once upon a time, the nickname "circulator"—one who believed in Harvey's discovery—a very opprobrious epithet indeed in our "liberal profession" ? quite as bad as "homœopath" now ; and did I one day not hear a great orator bring down the house by exclaiming, "They are slaves who dare not be in the right with two or three" ? Your "minority" argument is worn out.

Well, I wrote you the last time but one about the calorificant power of *Natrum muriaticum*, and you would like to know whether it acts upon a certain centre. I do not know its seat of action exactly, but I do know that it can often make a cold, chilly person feel warm ; and that is no small thing.

Some years since I was attending one of the children of a widow in the neighbourhood of London, and having made a pretty good therapeutic hit—*homœopathically*, my friend !—she said she should like to consult me on her own account for her nerves ; and when we had gone into that matter, she said, "Ah, I suppose it is no use to consult you about my cold shivering fits ; no one can do them any good." They were in this wise ; on going to bed at night she began to shudder and shiver, and on getting into bed and lying down, she would shiver to such a degree that her teeth chattered, and the movements of her body shook the bed. She had suffered this for years, and had been under a number of physicians for these cold shivers, but no one had ever touched them. She named five well-known homœopathic practitioners

who had in vain tried their hand at it ; one of these has since renounced Homœopathy and all its ways, and previously he had tacitly given up the use of dynamized remedies, and loves now to ridicule them. Still for all that, and all that, dynamized *Natrum muriaticum* cured these cold shakes promptly and permanently. Long afterwards this lady wrote that she kept a bottle of the medicine on her bedroom mantelpiece *au besoin*, or as we physicians so neatly put it, *pro re nata*, but never needed it.

I call *Natrum muriaticum* my calorificent. Try it !

XIX

Yes, you are quite right in saying that our *Natrum muriaticum* is your *Sodium chloride*, the common salt of our tables, and I am not at all surprised to learn that you cannot believe that it is in any sense a medicine. Many homœopathic practitioners are of the same opinion—but bah ! what have you and their *beliefs* to do with hard clinical facts ? I have cured no inconsiderable number of cases of disease with *Natrum muriaticum*—chilliness, swelled spleens, gout, constipation, and, above all neuralgias ; so what does it matter to me what you or they *think* about it ? I KNOW.

Now I would like to cite one more experience of mine with *Natrum muriaticum*, which, besides being very curious, is also practically important, and then I will not trouble you further with my attic salt !

I can give it you in a very few words. A lady, wife of an officer, came over from India, to be under my care. The difficulty in her case lay in this, that she was to stop with her husband's friends, who have a lovely place near the sea, in Sussex, but it usually upset her so much that she could not stay there. "And you know," said she, "it is so very unfortunate for I can stay there for nothing, and have the use of a carriage, and everything is so very nice ; and yet I am obliged to decline going there, and have to go to nasty lodgings by myself, which of course I have to pay for." Why can you not live at your husband's place ? "Oh ! it is the sea ; I am just the same on board ship, dreadfully ill."

Well, the burden of my song is just this—*Natrum muriaticum*, 6 trit., so modified this lady's state that she was not only able to stay at said place, but actually thereat enjoyed being and sitting by the sea.

This is my nineteenth reason for being a homœopath, and if you will accept it, I will promise you not to trouble you with anything more about the *Chloride of Sodium*, or *Natrum muriaticum*, as it is called by the homœopaths.

XX

If I had not promised to say no more about *Natrum muriaticum*, I should have liked to narrate to you a very interesting case cured by it—a case of very severe headache—but I must keep my promise. I may, however, just say that the lady is the patient of a medical man, both living near one another at the seaside, said gentleman having given himself some trouble to ridicule my published observations on the effects of *Natrum muriaticum*—for all that *Nat. mur.* cured the lady.

Telle est la vie—médicale.

The young wife of a country squire came to me, at the beginning of the summer of 1887, with severe headache at the back, that had made her life sour for a good twelvemonth ; she always woke with it ; it was throbbing ; and during the menses she also had a frontal headache. Left ovary a little swelled and tender. *Thuja occidentalis* in a rather high dilution and in infrequent dose cured her right off. She waited three months to see if the cure was real and then wrote me a grateful letter of thanks.

Please let this cephalalgia, cured by *Thuja* 30, be my twentieth reason for being a homœopath.

XXI

You say, "your letters lately would seem to be intended to show how very superior your Homœopathy is to that of your co-practitioners".

Well, that was certainly not my intention, but rather to show that people's beliefs have often nothing to do with facts ; for instance, you allopaths ridicule Homœopathy, but that system of medicine is true all the same. Many practitioners of Homœopathy ridicule some of the most brilliant clinical triumphs of the very system they belong to. In both cases the error is the same ; they both childishly suppose that *their powers* are the limits of the possible. I was merely trying to show the fallaciousness of their judgment ; and this is important, as the greatest enemies of Homœopathy are often its own weak-kneed or incompetent practitioners. To explain what I mean more fully, let me give you as my twenty-first reason a case of

MENORRHAGIA OF FIFTEEN YEARS' STANDING CURED BY
Phosphorus

The lady was 51 years old, and so you may call it metrorrhagia if you so prefer, but there had been no break in the menses, which were still regular. She came to me in October, 1882, and told me of her trouble, and that it dated from a miscarriage fifteen years before. She had often flooded at her confinements. *Phosphorus* 200 cured her. She went much smaller in the waist, and told me she "felt like a young girl". She had other inter-current remedies—*Lachesis*, *Ferrum*, *Thuja* and *Arnica*, but it was the *Phosphorus* that cured the hæmorrhage, I having to return to it three separate times, with months between, and the last time I used *Phos.* 100th potency.

Now I cite this case because it is purely and exquisitely homœopathic, and yet the bulk of the homœopathic practitioners in the world do not believe in what are called high dilutions, and for all that this case was cured by such dilutions. It follows that either they or I must be mistaken; the lady who was thus cured would laugh in your face if you were to ask her to believe that she received from me other than very powerful remedies. And, indeed, they were very powerful. And just think of the gallons of *Steel Drops* and tonics that she had had in vain during those fifteen years of bleeding!

XXII

You tell me you are much mistaken in me, for you had always thought I was, "for a homœopath a very big doser"? and that the *Phosphorus* I once mixed in a tumbler for your aunt actually "smoked!"

Perfectly true; I cannot discuss homœopathic (or, if you will, *my*) posology with you, but I will give you my rule, viz.: *The dose depends upon the degree of similitude*; the greater the similitude the higher the dilution and the less frequent the administration; the smaller the degree of similitude the lower the dose and the more frequent the repetitions of the dose. My own range of dose is from a few globules of the two-hundredth dilution at eight day intervals, down to ten drops of the mother tincture (of weak drugs, of course) four times a day.

The dose is quite often as important as the remedy, and your exclusively low, as well as the exclusively high

dilutionists, are only one-eyed practitioners, though of course kings among the blind, i.e. the allopaths.

It is your fault that I have touched upon the vexed question of the dose, that is to Homœopathy what the everlasting Irish question is in British politics.

My twenty-second reason for being a homœopath is one I published some years ago under the heading

CASE OF EXOSTOSIS OF RIGHT OS CALCIS CURED BY
Heclae lava

Dr. Garth Wilkinson went once to Iceland for a holiday, and observed that the animals which fed in the pastures where the finer ashes of Mount Hecla fall, suffered from immense maxillary and other exostoses. Being an adherent of the scientific system of medicine founded for us by Samuel Hahnemann, he brought some *Heclae lava* home with him, and it has been already successfully used to cure affections similar to those which it is capable of causing.

On July 3rd, 1880, a young lady, aged 15, came under my observation with an exostosis on her right os calcis, somewhat smaller and a little flatter than half a walnut-shell. It was at times painful. Patient was in other respects in good health and well nourished, but her teeth were not very sound. She goes blue in winter, and suffers also very badly from chilblains both on hands and feet, worse on hands.

R. Trit. 2 *Heclae Montis lavae*, 5 iv.

S.—Six grains three times a day.

17th. The exostosis is decidedly smaller; it never pains now. *Pergat.*

September 25th. The exostosis has entirely disappeared; the two heels being compared, no difference between them can now be discovered.

Heclae lava has been shown to consist of silica, alumina, calcium and magnesia, with some ferric oxide. We are, therefore, not astonished that it can cause and cure exostosis.

Brother allopath, this is science in therapeutics; what have you to take its place? Give absorbents and paint the part with iodine? What guarantee can you give me that your absorbents will not absorb a bit of the pancreas or some small glands in lieu of the exostosis?

Or are you, also, true to your principle: *Contraria contrariis curantur*? Then pray tell me what is the contrary of an exostosis?

XXIII

Referring to my remarks in my last letter but one, that so many of the practitioners of Homœopathy do not believe in the so-called high dilutions, I should like to add a word or two, as I see by your reply (only just to hand) that you have mistaken my meaning. I do not mean that none of the homœopathic physicians believe in said dilutions, but that only a small minority of them, perhaps about one-fourth in this country. Furthermore, my cure of hæmorrhage with *Phosphorus* is not only "an isolated case of the kind", but only one of a large number; in fact, scores of such cases were published in homœopathic literature long years before I knew anything about the subject. You evidently forget that I am precluded from getting my reasons from our literature.

And in case you might also think the same limitedness applies to the use of *Heclae lava* in exostosis, I may say that you can find other cases in our literature more striking than this one of mine, and—lest you should say faith did it—a Dublin physician cured his horse of a large exostosis with the same remedy! As my twenty-third reason for being a homœopath let me cite a

CASE OF CRANIAL EXOSTOSIS CURED BY *Aurum met.*

The case was published long ago, and so I will not trouble you with details: suffice it to say, that the man who had the bony growth in his skull was completely and permanently cured by me with Metallic Gold in homœopathic preparation. Nor is this a isolated case of the kind; the thing has been done oft before, any time during the last fifty years, and even before that.

XXIV

I am very anxious to show the difference between curing a case empirically and doing so scientifically—that is to say, homœopathically; and a paper I once published on *Aralia* will do this, and also be my twenty-fourth reason for being a homœopath. I choose this because you seem to think my singly given cases "isolated"

THE COUGH OF *Aralia*

Aralia racemosa is not an accepted homœopathic remedy, and Dr. Allen did not insert Dr. Jones's little

proving in his *Encyclopædia*, but he has put it into the Appendix.

Dr. Hughes has also now added it to the list in his well-known *Pharmacodynamics*, but only as a supplementary remedy. So it seems to be just timidly peeping into our big drug-house. I know of no clinical experience with it beyond what we find in Hale's *Therapeutics*.

It appears that the plant has a great reputation in the United States as a cough medicine, and Professor E. M. Hale very properly says that this warrants us in expecting that it has at least some specific affinity for the respiratory organs. The common people have in some way found out that the "spikenard" is good for coughs; Hale comes and makes a note of it. A step farther is made by Dr. S. A. Jones, who made a proving of it in 1870, and this lifted the popular cough medicine out of useful empiricism on to the scientific basis of Hahnemann's induction.

I happened to read Jones's proving in Hale's *New Remedies* some six or seven years ago, and I was much struck with the character of the cough. I fancy the thing that helped to impress it upon my mind was the fact that I had had just at that period a lady under my care who was suffering from a cough that came on after lying down at night. I had been tinkering away at this cough, and could not cure it; so I blamed the damp house in which the lady resided, and its proximity to a brook prettily hidden among the willows close by. *Hyoscyamus*, *Digitalis*, and a number of other remedies came into play, but the cough would not budge a bit. Need I tell the heart-rending tale that the patient lost faith in her doctor (the writer) and in his much-vaunted pathy, and set about healing herself with quack medicines and orthodox sedative cough mixtures? Of course, I felt humiliated, and I therefore made up my mind to read my *Materia Medica* a little more diligently. It was quite evident that the cough was a curable one, for the most careful physical examination failed to detect anything besides a few moist râles that tallied with the moderate amount of expectoration.

Failures are very instructive at times.

Just after having received my *congè* from this lady, I was reading Hale's *New Remedies*, and came across Dr. S. A. Jones's proving of *Aralia racemosa*, where he says: "At 3 p.m. I took

ten drops of the mother tincture in two ounces of water. An interesting book caused me to forget my 'dose'. The events of the night jogged my memory very effectually."

He goes on to say that he retired to rest at midnight, feeling as well as ever, but he "had no sooner lain down than he was seized with a fit of asthma".

I put down the book—Hale's *New Remedies* was not quite so thick then as it is now—and said to myself, "That's Mrs. N.'s cough, that is just how she goes. She lies down and forthwith begins to cough, to get laboured breathing, and to make her poor hard-toiling husband wish he were a bachelor": at least he might have wished it, for ought I know to the contrary.

A little time elapsed, and the writer was sent for to see one of this coughing lady's children with eczema. The bairn's common integument having been prescribed for, I timidly inquired about the cough. "Oh," said Mrs. N., "it is as bad as ever; I have tried everything, and do not know what to do." I sat down and wrote:

R *Tc. Aralia racemosa* 2, and it cured *citò, tutò, et jucunde* and that not because *Aralia* is good for coughs, and has an affinity for the respiratory organs merely, but because it is capable of causing a cough like the one that was to be cured.

This happened somewhere about six or seven years ago, and I have since cured this kind of cough with *Aralia* whenever I have come across it, and at a rough guess I should say that would be thirty or forty times.

Case II.—*Tussis Araliae*.—A lady came under my observation last summer. She resides in the West End of London, and had been under competent homœopathic treatment for her throat, and had certainly derived benefit, but still her cough did not leave her, so that she was on the point of removing from London and going to the South, whereof she is a native, she and her friends having become apprehensive lest her chest should become affected. Her cough was not identical with Mrs. N.'s, but the only difference was that it *did not come on till after a first sleep* of not long duration. Patient would go to bed quite well (so did Mrs. N., and so did Dr. S. A. Jones) and lie down and go to sleep, and *after a short sleep*, would wake up with a severe fit of coughing that would last an hour or more.

Aralia 3 cured it entirely in a few days, and she gave up all idea of returning to the South.

Case III.—*Tussis Araliae*.—A child of not quite six gets croupy coughs in damp weather that usually yield to *Dulcamara*. Occasionally, however, there remains the kind of nocturnal cough described in Case II, viz. she will go to bed, lie down, fall off to sleep, and presently awake with a violent bout of coughing. Originally, before thinking of *Aralia*, I had in vain given *Hyoscyamus*, *Gelsemium*, *Aconitum*, *Spongia*, *Hepar*, *Dulcamara*, *Phosphorus*, and *Bryonia*. Then the early nocturnal character of the cough determined me to try *Aralia*, and with prompt effect.

Case IV.—*Tussis Araliae*.—An asthmatic gentleman of 50 years of age, with moderate emphysema of the lungs, has long been under my care. At first he was almost always short of breath on exertion, and had bad nocturnal attacks of dyspnoea and cough. A prolonged course of constitutional treatment has at last partially cured him, but when he catches a cold he gets an attack of bronchial catarrh with *early nocturnal cough*.

It would be tedious to give the treatment of his whole case, but it will suffice to say it consisted principally of antispasmodics and hepatics.

One day this gentleman said he wished I could give him a medicine *for his cough*, to have by his bedside at night, because otherwise when he caught cold (as at this time) he would go to bed quite well, fall asleep, and presently awake with a violent fit of asthma that would last from one to two hours, more or less; then he would get up a little phlegm and go to sleep again.

I prescribed one-drop powders of *Aralia* 3x, *pro re nata*. The next time I had occasion to see this gentleman he exclaimed, "I thought those powders would have killed me. I took one as you directed, when my cough became much more violent than I had ever known it, but it soon ceased, and has never returned."

He keeps some of these powders by his bedside ever since, and on various occasions they have helped him, thus far unfailingly. He has not had an aggravation since the first time of using them.

These cases are samples only, but they teach a useful lesson: to give more than these would be irksome.

It will be seen that *Aralia*, although a new remedy, is a comparatively old friend of mine, and I can confidently commend it for *early nocturnal cough* that occurs either *immediately on lying down*, or MORE COMMONLY *after a first fore-midnightly sleep*.

Professor Samuel Jones's cough was immediately after he had lain down, but it will be noted that he did not retire till midnight, whereas all my patients, I believe, went to bed before. From a fairly extensive experience of *Aralia* as a cough remedy I have formed the conclusion that it is homœopathic to its cough by reason of its *time* and *patient's recumbent position*.

It is *no good*, I believe, in cough occurring *at any time* on lying down, neither does it avail in a cough caused by a relaxed uvula; neither will it, as far as I am aware, cure any lung lesion whatsoever beyond bronchial irritation and catarrh. And most positively *it is no good at all* in the after midnightly or 2 or 3 a.m. dyspnoea and cough of genuine asthma. In such cases I have given it in vain. But for the previously described variety of cough it is a

remedium probatissimum. Here, for the thousandth time, we see the exactness of our homœopathic science. In conclusion, my thanks to Professor Hale for introducing my now dear friend, *Aralia*, and my still greater gratitude to Professor Samuel Jones for the more intimate scientific acquaintance. As homœopaths we owe a deep debt of gratitude to drug provers.

XXV

It may be about three years ago, or thereabouts, that it was my duty to give an opinion on the state of a gentleman of middle age, resident in London, and who was considered in a dying state. He had not much faith in any medical man, or in any pathy, and had for years wandered from one physician to another for his serious heart disease and frightful dyspepsia. The allopaths did him most good, he thought, on the whole, with their remedies, but the good effects did not last. The prescriptions showed that his state had been correctly diagnosed, and not badly treated from their standpoint. He received in turn cordials, iodides, antacids and tonics, but his disease—aneurysm of the aorta—got worse.

The homœopaths had treated him symptomatically—and he had plenty of symptoms—and once or twice he really thought he was cured for a day or two, but then he became suddenly as bad as ever—his aneurysm evidently got larger.

When I first saw him he seemed almost moribund, and had received the last rites of the Church.

After going over his case well, and taking into account the state of his tissues and organs and the size of his aneurysm, so far as that could be determined, I gave as my opinion that he might slowly get better, and be eventually cured of his disease.

That gentleman has since married, and the aneurysm, though not yet quite gone, is slowly yielding to homœopathic treatment, freely applied under diagnostic commonsense.

The principal remedies were *Aurum met.*, *Chelidonium majus*, *Carduus*, *Ceanothus*, *Glandium quercus*, *Aconitum*, *Ferrum*, *Cactus grand.*, and *Baryta muriatica*, the first-named and the four last being directly—specifically—curative. My knowledge of the use of *Barium* is due to

Dr. Flint, and this is not the first or second time that Homœopathy has cured aneurysm.

I saw my patient walking along the street a few days since with his wife, and I was quite struck with his healthy, ruddy appearance. The power of Homœopathy over aneurysm gives my twenty-fifth reason for being a homœopath—and that lands me just half-way with my fifty reasons. Have you thus far conceived any greater respect for Homœopathy, or can you explain *all* my reasons away? At least you are beginning to see that my statement at your uncle's house was not boastfulness, but a mere statement of fact. Pray understand that I am not in the least desirous of making you, or anybody else, a homœopath; it makes no difference whatever to me. Nor does it make any difference to truth: truth will get on very well without any of you.

Nor do I anticipate any particular good from all this scribbling of my fifty reasons to you; I do it just to substantiate my own position, and slap the jeering ignorance of orthodoxy in the face.

XXVI

You complain that I indulge in too much abuse, and that I am unnecessarily pugnacious and offensive. Perhaps so. Did you not have the impertinence to call the homœopaths quacks? You who know nothing about what they do! and do not you allopaths, every man of you, go about day by day and slander the homœopaths!

You allopaths bear false witness against your homœopathic neighbours every day of your lives—did I not once hear you say to your aunt at table, "Oh, yes, Auntie, take some of your little homœopathic pilules, *they won't hurt!*"

You said I must give you my fifty reasons out of my own life's work, as I had promised, or "come down the tree".

Well, I sit firmly on a very big bough of the old tree of truth, and it is not an ignorant allopath who will ever dislodge me.

It may be half a dozen years ago that an unusually beautiful, sweet girl, a good way in her twenties, residing in an important provincial town, was noticed to fade and get weak, with peculiar ill-defined throat symptoms, weakness in her back, rectal and uterine irritation, weakness

and emaciation. People could not think what had come over her. She is one of those human highbreds who will not cave in, but, if duty calls, will go on till they drop : till then, existing on their "go" rather than on their physique.

In life they are commonly misunderstood, and because they can put on a spurt or clear a very high-fenced difficulty *au besoin*, the unknowing and non-observant think they are really strong, but are lazy or sham.

"Oh ! she nursed her nieces for weeks and never had her clothes off, but did not seem to mind a bit, and now she would have you believe she is so delicate ; she shams, it's all put on." But it is not put on at all : if you examine their heads you will find the animal sphere almost entirely absent.

Dr. R. M. Tuttle, speaking on this point, says :

"Some men can do with ease as much physical labour as would kill other men. The same is true of mental labour. A man like Gladstone can take on himself a course of work the mere attempting of which would effectually silence any one else. He is a man with a large, highly organized brain, but he possesses, besides, the well-balanced organs of animal life which are required to generate the energy that such brains can transmute into intellectual force. To be able to do the full measure of work of a man, it is necessary to be a good animal."

The lady in question has the most exquisitely intellectual development, a wonderful arch of cerebrum, but no occipital power worth while.

Well, the patient had been through a domestic trial and had *bent* ; some thought she had *broken*.

A good, kind, gentle allopathic physician, who was wont to attend the family, also attended her, and diagnosed Bright's disease of the kidneys. Said she to her mother : "I am truly sorry to have to tell you that Miss — has a disease of the kidneys that cannot be cured ; you must take care of her ; she must wear flannel all over, and avoid cold and damp ; she may last with care a very long time, but you must not expect her to get well."

Much family council was held together, and the outlook being dark and hopeless, the young lady was brought to me.

Homœopathy cured her in about eight months, and the young lady thereupon got married, and has now several bouncing children, and she herself continues in good health.

Not a vestige of albumen has been in the urine for nearly five years. What cured her ? *Mercurius vivus*. She took two doses a day for many months. I did not hit it right off, but tried two or three remedies at first without avail.

This is my twenty-sixth reason for being a homœopath, and it alone were amply sufficient ; and whether it be God's will that I die to-night, or live for another fifty years, I feel that while I do live I am in duty bound to fight the good fight of Homœopathy with all the power I possess : were I to do less I should be afraid to die.

Young man, the responsibility of *not* being a homœopath is very terrible.

XXVII

POST-ORBITAL NEURALGIA OF TWENTY YEARS' STANDING

Must be my twenty-seventh reason for being a homœopath. This case (which came under observation on January 9th, 1882), is one of considerable interest on various accounts. Its subject, a lady of rank, over fifty years of age, had been in turns, and for many years, under almost all the leading oculists of London for this neuralgia of the eyes—i.e. terrible pain at the back of the eyes, coming on in paroxysms, and confining her to her room for many days together ; some attacks would last for six weeks. Some of the neuralgic pain, however, remained at all times. Her eyes had been examined by almost every notable oculist in London, and no one could find anything wrong with them structurally, so it was unanimously agreed and declared to be *neuralgia of the fifth nerve*. Of course no end of tonics, anodynes, and alteratives had been used. The oculists sent her to the physicians, and these back again to the oculists. The late Dr. Quin and other leading homœopaths had been tried, but "no one had ever touched it".

Latterly, and for years, she had tried nothing ; whenever an attack came on, she would remain in her darkened bedroom, with her head tied up, bewailing her fate. To me she exclaimed, "My existence is one life-long crucifixion !"

I should have stated that the neuralgia was preceded and accompanied by influenza. In the aggregate these

attacks of influenza and post-orbital neuralgia confined her to her room nearly half the year. In appearance she was healthy, well-nourished, rather too much *embon-point*, and fairly vigorous. A friend of hers had been benefited by Homœopathy in my hands, and she therefore came to me "in utter despair".

These are the simple facts of the case, though they look very like piling up the agony! Now for the remedy. The resources of allopathy had been exhausted, and, moreover, I have no confidence in them anyway: Homœopathy—and good Homœopathy, too, for the men tried knew their work—had also failed. Do-nothing, now much in vogue, had fared no better. I reasoned thus: This lady tells me she has been vaccinated five or six times, and being thus very much vaccinated, she may be just suffering from chronic vaccinosis, one chief symptom of which is a cephalalgia like hers, so I forthwith prescribed *Thuja* 30. It cured, and the cure has lasted till now. The neuralgia disappeared slowly; in about six weeks (February 14th, 1882) I wrote in my case-book, "The eyes are well!"

As I have not heard from the patient for some time, I am just writing a note to her to know whether the neuralgia has thus far (December 30th, 1882) returned. The reply I will add.

Of course, it does *not* follow that because *Thuja* cured this case of neuralgia of some twenty years' standing, that *therefore* the lady was suffering from *vaccinosis*; that *Thuja* DID cure it is incontrovertible, and my *vaccinosis* hypothesis led me to prescribe it. More cannot be maintained. At least, the case must stand as a clinical triumph for *Thuja* 30—this much is absolute.

In reply to my enquiry, I received the following:

"January 1st, 1883.

... I have been in very much stronger health ever since I crossed your threshold, and excepting one or two *attempts* at a return from the enemy, I have been quite free from suffering . . ."

This lady continues well of her post-orbital neuralgia at the time of going to press. After the disappearance of the neuralgia she had several other remedies from me for dyspeptic symptoms.

XXVIII

Let this reason be a case of:—

CHRONIC HEADACHE OF NINE YEARS' DURATION

Miss G—, aet. 19, came under my care on March 12th, 1881, complaining of bad attacks of headache for the past nine years. She said it was as if the back of her head were in a vice, and then it would be frontal, and throbbing as if her head would burst. She was very pale, and her forehead looked shiny, and in places brown.

These "head attacks" occurred once or twice a week.

Tendency to constipation; menses regular; an old sty visible on left eyelid; poor appetite; dislikes flesh-meat; liver enlarged a little; had a series of boils in the fall of 1880.

Feet cold; used to have chilblains. For years cannot ride on an omnibus or in a cab, because of getting pale and sick; skin becomes rough in the wind; lips crack; gets fainty at times.

To have *Graphites* 30.

April 13th.—Appetite and spirits better, but otherwise no change. Questioned as to the duration of the head attacks, she tells me the last but one continued for three weeks—the last, three days. Over the right eye there is a red, tender patch; has two or three white-headed pustules on her face.

Was vaccinated at three months, re-vaccinated at seven years, and again at fourteen. Had *small-pox* about ten years ago.

Thus here was a case that had had small pox ten years ago, or thereabouts, for she could not quite fix the date, and had been vaccinated three times besides, once subsequent to the *small-pox*!

R. *Tc. Thuja occidentalis*, *Ziv.* 3x.

To take five drops in water twice a day.

May 13th.—Much better; has only had one very slight headache lasting an hour or two; the frontal tender patch is no longer tender; no further faintness at all. Lips crack. The pustules on the face gone, and skin quite clear.

To have *Thuja* 12, one drop at bedtime.

June 17th.—Was taken ill yesterday fortnight with soreness of stomach; fever; nausea and perspiration. Subsequently spots broke out like pimples—eight on the face, one each on the thumb and wrist, one on the foot, and two on the back; they filled with matter, were out five days, became yellow, and then died away. Her mother says the symptoms were just the same as when patient had the *small-pox*. Her headaches were well just before this bout came on.

July 1st.—Continues well.

July 27th.—The headaches have not returned.

February 24th, 1882.—The cure holds good, for she has had no headache, and is otherwise well. She had subsequently some

other remedies for the little tumour on her eyelid, and for a small exostosis on lower jaw, but she had received nothing but *Thuja* when the cephalalgia disappeared, and it was two or three weeks before the next medicine followed.

Some months after this date this young lady was brought by her mother merely to show me how well she was, and to take final leave of me; two years later I learned from her mother that she continued well, so the cure is permanent.

An interesting feature in this case is the curious attack which came on at the beginning of June. My reading of it is that it was really a proving of *Thuja*, or a general organismic reaction called forth by it; and this sent me often up to the thirtieth dilution in my subsequent use of *Thuja*, though I have occasionally found the third decimal dilution answer better than the thirtieth.

But this is not the point of my thesis, for this case was cured by the low dilution, and when the low dilutions cure, and cure promptly, even though not very agreeably, but well, it cannot be necessary to go up any higher, especially as one's faith is sufficiently on the stretch without it.

XXIX

ENLARGED GLANDS. APEX-CATARRH

Master C—, aet. 11½, came under my care on August 18th, 1881, complaining of a cough, worse at 7.30 p.m.; he also coughed by day and through the night, but it did not wake him. He perspired fearfully, worst on the head, and worse during the night. Over upper half of left lung one heard moist cracking *râles*. The cervical lymphatic glands at the top of the apex of left lung were indurated, and distinctly "feelable". He weighed 5 stone 4 lbs. The vaccination scars were on the left arm, and the glands over the apex of the right lung were not indurated. Induration of the lymphatics on the left side of the neck (the vaccinating being performed on that side) is the rule after vaccination, as anyone may observe for himself if he will take the trouble to examine a *healthy* child just before vaccination and any time thereafter. I say, *any time thereafter*, for the thing generally persists for a very long time, unless cured by medical art.

R *Thuja* 30, m. ii. Sac. lac. q.s. Fiat pulv. Tales xxiv. One, three times a day.

August 27th.—Is well of cough, but the sweats continue. To take no medicine.

September 6th.—The most careful examination of chest reveals no *râle*; there is no cough; the sweats have quite ceased; the said cervical lymphatics can *not* be found. The boy now weighs 5 stone 8 lbs., so that he has gained 4 lbs. in weight since he got the *Thuja*.

Discharged cured.

The boy had been at school, and was sent home to his parents by the school physician on account of his obstinate cough, and because his general symptoms excited alarm. To me it appeared to be the first stage of phthisis. That the boy should increase in weight at home just after returning from school is, of course, not necessarily due to the medicine; home life, too, would improve his nutrition generally, and would perhaps also account for the disappearance of the apex-catarrh, cough, and perspirations. But what is to account for the disappearance of the induration of the cervical glands?

XXX

Of course you will perceive that what I understand by vaccinosis has no necessary connection with Homœopathy, the *Thuja* being homœopathic to the cases.

As my thirtieth reason for being a homœopath you will allow me to cite another *Thuja* case—viz. one of

ACNE OF FACE, AND NOSE, AND NASAL DERMATITIS

A young lady, about twenty years of age, was brought by her mother to me on October 28th, 1882. Patient had a very red, pimply nose, not like the red nose of the elderly bibber, or like that due to dyspepsia or to tight lacing, but the pimply, scaly, nasal dermatitis, which extended from the cutaneous covering of the nose to that of the cheeks, but appearing here more as facial acne. The nasal dermatitis was, roughly, in the form of a saddle. Of course, this state of things in an otherwise pretty girl of twenty was painfully and humiliatingly unpleasant to her and to her friends; in fact, it was likely to mar her future prospects very materially, more especially as it had already existed for six years, and was making no signs of departing. She also complained of obstinate constipation. The pimples of the nose and face used to get little white mattery heads.

R *Thuja occidentalis* 30.

November 30th.—Pimples of face decidedly better. Nose less red. Constipation no better.

R *Thuja occidentalis* 100.

January 3rd, 1883.—The face is free! Her mother gratefully exclaims, "She is wonderfully better." I ask the young lady which powders did her *most good*; she says, "The *last*". The skin of the nose is normal, but the constipation is no better, and for this she remains under treatment.

That *Thuja* cured this case is incontrovertible.

XXXI

NEURALGIA OF RIGHT EYE

Mr. —, a gentleman of position and means, about fifty years of age, came to consult me on June 28th, 1882, for a neuralgia of the right eye.

He complained of almost constant pain in right eye ever since Christmas 1881, i.e. just about six months. Had had neuralgia in head and shoulders in 1866, and so much morphia had been injected in his shoulders by a doctor in Scotland that it almost killed him: for seven or eight hours it was doubtful if he would recover.

Has a brown, eczematous, itchy (at night) eruption on both shins and between the toes. The neuralgia of right eye, and for which he comes to me, is bad both day and night, but rather worse at night. Mr. (now Sir William) Bowman had examined the eye and declared it to be neuralgia, the eye being normal. Mr. White Cooper had done the same.

On my enquiring when he was last vaccinated, he seemed completely frightened, and stammered out rapidly, "I should not like to be vaccinated again."

"Why?"

"I was very seedy the last time I was vaccinated; in fact, I felt awfully ill for about a month," and he again hurriedly protested that he would not like to be vaccinated again. The vaccination that had made him so ill was either in 1852 or 1853.

This seemed to me to be a case of vaccinal neuralgia, and therefore I ordered *Thuja* 30, in infrequent dose. This was on June 28th, 1882.

July 8th.—But very little pain after the first powder. To have the same medicine again.

The cure proved permanent, and is interesting as proof of the rapidity with which the *most like* remedy can cure a neuralgia.

XXXII

Being a case of

DISEASED FINGER-NAILS

On December 22nd, 1882, a young lady of twenty-six came under my care for an ugly state of the nails of her fingers. Naturally, a lady of her age would not be indifferent to the state of her nails. These nails are indented rather deeply, and in addition to these indentations there are black patches on the under surface of the nails, reaching into the quick. Very slight leucorrhœa occasionally. She had chicken-pox as a child of eleven. On her shoulders there is an eruption of roundish patches, forming mattery heads. The black patches have existed these eighteen months.

I ordered *Thuja* 30 (one in six).

March 19th, 1833.—Has continued the *Thuja* 30 for just about three months, with the result that within a fortnight from commencing with it the black patches under the nails began to disappear, and there is now no trace of them.

I will not trouble you with any more reasons based on the therapeutic action of *Thuja*.

You want to know whether I really claim that Homœopathy can cure cataract with medicines. You know very well that that has been my contention for a number of years; but I will revert to that again.

XXXIII

As my thirty-third reason for being a homœopath I propose to give you a case of cataract cured by medicines. You said in one of your letters to me that you would like to see the man who could dissolve a case of genuine senile cataract with medicines. Well, I will recount to you how I was converted myself.

The limits of the curable and of the incurable are not represented by any fixed lines; what is incurable to-day may be curable to-morrow, and what we all of this generation deem incurable may be considered very amenable to treatment in the next generation.

When walking the hospitals years ago I was taught, in respect of cataract, that there was nothing for it but an operation; a few months since, I spent a little time at an excellent metropolitan hospital for the eye, and found that that is still the one thing taught,—viz. if you have a cataract, there is no hope for you beyond that of getting blind, and then trying to get your sight again by having the cataractous lens removed.

On May 28th, 1875, I was sent for to see a lady suffering from acute ophthalmia. She informed me that her friend Dr. Mahony, of Liverpool, had recommended her to try Homœopathy when she should again require medical aid, and had also mentioned my name to her. She seemed rather ashamed of calling in the aid of a disciple of Hahnemann, and was very careful to lay all the blame upon Dr. Mahony: for, said she, I know nothing about it. My patient was in a darkened room, and hence I could not well see what manner of woman she was; but I soon learned she was the widow of an Indian officer, had spent many years in India, where she had had ophthalmia a great many times, and that she was in the habit of getting ophthalmia once or twice a year, or

even oftener, ever since. It generally lasted several weeks, and then got better; no kind of treatment seemed to be of any avail. Did I think Homœopathy would do her any good? I replied that we would try it.

I made an attempt at examining the eye, by lifting up one of the laths of the Venetian blind to let in the light, and then everting the lid; but the photophobia and consequent blepharospasm were so great that I barely succeeded in recognizing that the right eye was a red, swelled mass, while the left one was only comparatively slightly affected; in fact, a case of ophthalmitis. A more minute examination was impossible, as the pain was so great that the patient screamed whenever any light was let into the eye. I took a mental note of the chief symptoms, notably of the fact that the inflammation was chiefly confined to the right eye, and went home and worked out the homœopathic equation; I was specially anxious to make a hit, and so I spent about half an hour at the differential drug-diagnosis. The drug I decided upon was *Phosphorus*. Thus—

R *Tc. Phos. 1m. xij.* Sac. lac. q.s. Div. in p. æq. xij.

S.—One in a little water every hour.

That would be *about* the one-hundredth part of a grain of *Phosphorus* at a dose, or rather less.

I called the next day, about eighteen hours thereafter, and my patient opened the door herself, slightly screening her eyes with her hand, and quite able to bear a moderate amount of light. The inflammation was nearly gone; the next day it was quite gone.

Patient's amazement was great indeed; in all the twenty years of these ophthalmic attacks she had suffered much, and had had a number of doctors, including London oculists, to treat her, but to no purpose. And yet she had been treated *actively*, and there had been no lack of physic and leeches, and also no lack of medical skill; but there was lacking in their therapeutics the one thing needful . . . THE LAW OF SIMILARS.

How was it that I, with no very *special* knowledge of the eye or its diseases, and with only usual practical experience, could thus beat skilled specialists and men of thrice my experience?

Was it, perhaps, greater skill, deeper insight into the disease, more careful investigation of the case? By no means. . . . It was just the law of similars, patiently carried out in practice.

My dear allopathic *confrère*, WHY are you so very simple that you leave us homœopaths with this enormous advantage over the *best* of you? Any little homœopathic David can overcome the greatest allopathic giant if he will only keep to his *Materia Medica*, and the *directions of Hahnemann*. And the good thing lies so near, and is so constantly thrown at you. If we homœopaths were only

to make a secret of our art, you would petition the Government to purchase it of us!

But *revenons à nos moutons*. My patient was naturally very grateful, and said, "If that is Homœopathy, I wonder if it could cure my cataract?"

On examining the eyes now with some care one could readily perceive that there were opacities behind the pupils, that of the right being the much more extensive. She then informed me that she had had cataract for some years, and was waiting for it to get ripe so as to undergo an operation. She had been to two London oculists about it, and they agreed both as to diagnosis and prognosis, and eventual operative treatment. She had waited a year and gone again to one of these eye surgeons, and been told that all was satisfactorily progressing, although but slowly; it was thought it might take another two years before an operation could be performed. Her vision was also getting gradually worse, and she could not see the parting in her hair at the looking-glass, or the names over the shops, or on the omnibuses in the street; could see better in the dusk than in broad daylight.

In answer to her question as to the curability of cataract with medicines, I said I had no personal experience whatever on the subject beyond one case, and I thought that from the nature of the complaint, one could hardly expect medicines to cure it, or even affect it at all. Still, some few homœopaths had published such cases, and others had asserted that they sometimes did really succeed in curing cataract with homœopathic treatment. I added that, inconceivable as it was to me, yet I had no right to question the veracity of these gentlemen, simply because they claimed to do what *seemed* impossible.

In fine, I agreed, at patient's special request, *to try to cure her cataract with medicines* given on homœopathic lines!

I must confess that I smiled a little at my own temerity. But I consoled myself thus: What *harm* could it do to treat her while she was waiting to get blind. At the worst I should *not* prevent it!

So it was agreed she should report herself every month or so, and I would each time prescribe for her a course of treatment.

All this was there and then agreed to.

She took from May 29th to June 19th, 1875, *Calcarea carbonica* 30, and *Chelidonium* 1, one pilule in alternation three times a day. Thus she had two doses of the *Calcarea* one day, and one the next, and conversely of the *Chelidonium*.

There were indications for both remedies, though I cannot defend the alternation: I hope I alternate less frequently now.

Then followed *Asafetida* 6, and *Digitalis purp.* 3.

Then *Phosphorus* 1, and subsequently *Sulphur* 30, and then *Calcarea* and *Chelidonium*.

Thus I continued ringing the changes on *Phosphorus*, *Sulphur*, *Chelidonium*, *Calcarea carbonica*, *Asafetida*, and *Digitalis*, till the beginning of 1876.

On February 17th, 1876, I prescribed *Gelsemium* 30 in pilules, one three times a day. This was continued for a month.

Then I gave the following course of drug treatment: *Silica* 30 for fourteen days; *Belladonna* 3 for fourteen days; *Sulphur* 30 three times a day for a week; and then *Phosphorus* 1 for a fortnight.

A month or so after this date—March 20th, 1876—I one morning heard some very loud talking in the hall, and my patient came rushing in and crying in quite an excited manner that she could almost see as well as ever. She explained that latterly she seemed able to discern objects and persons in the street much better than formerly, but she thought it must be fancy, but that morning she suddenly discovered that she could see the parting in her hair and she at once started to inform me of the fact and, *en route*, she further tested her vision by reading the names over the shops which she previously could not see at all.

I ordered the same course of treatment again, and in another two months the lenticular (*or* capsular) opacities completely disappeared, and her vision became and remained excellent.

She had never any recurrence of the ophthalmia, and she remained about a year and a half in my neighbourhood in good health. She then went abroad again, and in her letters to her friends since, she makes no mention of her eyes or sight, and hence I fairly conclude that she continues well.

The patient's age is now about fifty or fifty-one.

I have detailed this case somewhat circumstantially, so that my conversion to a belief in the medicinal curability of cataract may appear to others as it does to me.

This case made a considerable stir in a small circle, and a certain number of cases of cataract have since come under my care in consequence, and the curative results I have obtained in their treatment are extremely encouraging.

And I may add that I published this in the year 1880, and since then I have partially or completely cured a number of cases of cataract with remedies, and this power I possess because I am privileged to be a homœopath.

XXXIV

You ask me whether the homœopaths as a body endorse my views as to the amenability of cataract to medicines?

My answer is that some do and some do not, but that is not material; the task is *very* difficult, and not within the power of every physician who happens to practise on homœopathic lines: the higher and highest work of which Homœopathy is capable depends upon the capacity of the operating clinical artist—i.e. upon the homœopathic

practitioner. What I claim for Homœopathy is what *I have done* with its aid myself; other physicians will be able to do more, and some less.

As my thirty-fourth reason for being a homœopath I will cite the details of a case of cataract, begun in May, 1884 and ended in May, 1886.

Mrs. V—, aet. 66, came under my observation on May 20th, 1884. She came through a friend whose cataract had been cured by me with medicines.

Mrs. V.'s history is this: In November, 1882, and in April, 1883, she had been operated upon for cataract of the right eye. Inflammation set in, and the eye was lost. Now her left eye has cataract, the lens having a grey look, and her vision is much impaired; she wears spectacles, but can no longer sew or thread a needle with their aid. Her father and his sister had cataract. Patient's skin is scaly and pimply, more particularly that of the face.

R. *Tc. Sulph.* 30. *3iv.*

S.—Five drops in water night and morning.

August 30th.—Since last date I sent her a medicine, but omitted to note it. She thinks her sight clearer.

Calc. carb. 30.

October 29th.—"I am thankful to say my sight keeps better, only I am nervous, and everything falling makes me jump."

Thuja 30.

December 2nd.—"I feel my sight improving."

Causticum 100.

January 1st, 1885.—"I am thankful to tell you my sight is much better; I can now see wonderfully well to read and write with my spectacles on, and I can see very well to go about or do anything in the house without the spectacles."

Rep.

March 25th. "Cannot bear the light so well; the eye which is blinded waters very much."

Psor. 100.

April 28th.—Bad cold.

Puls. 1x.

May 2nd.—On this day the patient paid me her second visit, and the note in my case-book runs, "The left lens is decidedly less milky; can see to thread a needle."

Rep.

July 2nd.—"My eye is not quite so clear."

Silicea 30.

August 27th.—No change.

Causticum C.

October 3rd.—Better of self, and sees better.

Rep.

January 18th, 1886.—No further change.
Rep.

March 9th.—About the same as three months ago.
Puls. 1x.

May 18th.—Vast improvement; can read, write, and see well, and there is now only the faintest opacity of the lens.

I heard from her in October, 1887, and her vision continued in the same excellent state, and she is now just on seventy years of age.

So you see here one eye had been lost through the operation for cataract, and nevertheless the cataract in the other eye had been cured. I do not say the lens is at the centre as clear as yours or mine, but the cataract is gone, and that little rest of opacity does not affect the vision at all appreciably, and is not of the nature of progressive cataract but is the remaining bit of it that Nature cannot get rid of, but it is no longer cataract, but its stationary remains.

Does this case convince you?

XXXV

It is the merest folly on your part to pretend to question my diagnosis of cataract; whatever truth there may have been in such objections when I cured my first case nearly a dozen years ago, that can hardly be valid now. But I make you a present of *all* diagnostic power, if that will please you, inasmuch as the cited cases were diagnosed by eye specialists of the greatest eminence and experience, so what is your next objection? That it was not *senile*? then take what I published in the "HOMŒOPATHIC WORLD," October 1st, 1881. I will copy it word for word:—

CASE OF CATARACT MUCH AMELIORATED BY MEDICINE

In a little monograph I have sought to defend the thesis that cataract can be often cured, and still oftener ameliorated, by the aid of medicines given internally. The bulk of the profession, of course, ignore the thing entirely. That I expected. A few of the more enlightened welcomed the little book as an honest attempt—as an imperfect, but solid beginning. Yet others shook their heads in good old-fashioned honest doubt, and muttered something about "mistaken diagnosis"; and this not

without a chuckle at their own superior powers in this regard.

Since the publication of "Curability of Cataract with Medicines", I have continued my humble efforts in the same line, sneers and jibes notwithstanding. I have only treated a very few cases, partly because I do not care to begin unless a patient is willing, if necessary, to go on for a year or two, and this most of them decline.

It is no wonder people are very incredulous about the possibility of modifying the stroma of an opaque lens; for it is indeed *very* difficult, and I fail myself but too often, yet by no means always, and I consider the future of the question very hopeful.

The opponents of the thesis that an opaque lens can be modified by medicines often cite the *very aged* as more than usually hopeless. But I propose to bring a case showing that even an octogenarian may be materially benefited, and get a considerable amount of useful vision restored. It is the oldest case I have ever treated, and has turned a few scoffers into respectful listeners. I do not give all the treatment, but only the relevant part of it.

Mrs. —, aet. 81, came under observation at the end of the year 1880, suffering from cataract of both eyes, diagnosed by various physicians and specialists. Her vision was much impaired; reading had become impossible, and she could barely recognize a person in the street, or the pictures on the walls of my consulting-room. Thinking the case hopeless, principally on account of her advanced age, I did not enter with my wonted minuteness into her case, but gave *Chelidonium 1x*, five drops in water night and morning, on pathological grounds.

February 2nd, 1881.—She came and said she felt more comfortable in her *mouth*, her tongue being less hard and stiff; vision the same. Thinking there might be yet a glimmer of hope for the venerable lady—at least that absolute blindness might possibly be averted—I went into her case with greater care. I found she had occasional diplopia, and things seemed farther off than they really were. But the thing that had long distressed her was this: *On awaking in the morning her tongue was as hard and stiff as a board*. That this should have any connection with the cataractous lenses was not apparent; still it was the *most constant, peculiar, and characteristic symptom*, and, moreover, a very distressing one. I turned up a Repertory, and finally decided on *Sulphur iodatum* (see Symptom 40 in Allen's *Encyclopædia*). Considering the general character of the remedy, and the pathology of the disease, I did not hesitate, but gave six grains of the fourth centesimal trituration every night at bedtime.

March 21st.—My report for this day in my case-book reads thus:—"Hardness and stiffness of tongue *gone*, and she had it

two years ; it was quite distressing ; sees *decidedly* better at a distance."

She came by rail to town to see me, and a married daughter was in the habit of meeting her at the station. When she first came to me she was not able to recognize her daughter on the platform, but this morning she recognized her already at quite a distance, and that readily, and can as readily discern my pictures.

Rep.

July.—Vision much improved ; can now read an article in the newspaper.

R. *Iodium* 30.

August.—Receive word from the daughter that patient now sees so well that she does not propose continuing treatment any longer. She reads books with large print comfortably.

September 15th.—A lady friend of the patient called about her own condition, and remarked, "Mrs. — now reads the paper from an hour and a half to two hours every day."

She is now eighty-two years of age.

London, September, 1881.

This is my thirty-fifth reason for being a homœopath.

XXXVI

You are in a sense quite right in saying that my last-cited case was not a complete cure, but kindly note that I did not say it was ; moreover, the *cure* was enough, for what more does an octogenarian want than the power to read the newspaper by the hour ? As my thirty-sixth reason for being a homœopath I will mention one other case of cataract—this time so completely cured that patient can read *No. 1*. Is that good enough ?

The lady came first to me in June, 1884, being then fifty-eight years of age, and as clear-thinking, hard-headed a sceptic as ever you saw. The diagnosis was made by an eminent specialist, whose opinion you would not dream of doubting. You see he is so sweetly orthodox ! If he were to turn homœopath, however, he would not (thereafter) know a lens from a broom-handle !

I looked humbly at the lenses—both of them—and found them uniformly milky-opaque ; but as I am not an oculist, and, besides, am so sorely heterodox, you will not care to know how the lady's lenses appeared to my optics ; so just take it parenthetically as it were, that *to me* they were " kinder darkish like " ; cataract our orthodox specialist calls it ! Well, I discharged her cured in July, 1887, and able to read *No. 1*.

As I said before, is *that* good enough ? In any case it is my thirty-sixth reason for being a homœopath—so I bid good-bye to cataracts for the present !

P.S.—In case you should care to know what remedies this lady took, I subjoin a list, viz. *Urea* 6 and then 12, *Psoricum C*, *Calc. carb. C*, *Sulphur φ*, *Silicea* 30, *Thuja C*, *Calc. carb.* 30, *Causticum C*, *Silicea C*, *Caust.* 30, *Lapis alb.* 30, *Sulphur* 30, *Conium* 1, *Calc. fluor.* 30, *Graphites* 30, *Chelidonium θ*, *Hepar* 3, etc., etc. The reasons for giving them I cannot explain here, but the patient's lenses are now so clear that she sees to thread needles.*

XXXVII

You take exception to the *number* of remedies used in my last case, and want to know "which cured the case ?"

Will you get a long ladder and put it up against the side of your house, and mount it so as to get into your house by the top window ; and when you have safely performed the feat, write and tell me which rung of that ladder enabled you to do it.

I sympathize with your objection, because it was once my own great stumbling-block in accepting the results of homœopathic treatment ; it may perhaps be adequately explained somewhere in the vast literature of the homœopathic fraternity, but I have never come across such an explanation, and hence have had to work it out for myself. I will put it to you thus :—In difficult, chronic, complicated cases of disease you require not a remedy but a ladder (series) of remedies, not one of which can of itself effect the cure, but each of which works *cure-wards*, their cumulative action eventuating in a cure—*THAT is how I cure cataract*, and many other chronic diseases that are currently held to be incurable by most men of all shades of therapeutic opinion. I regard this power of utilizing a long series of remedies for the cure of difficult chronic cases as only second in importance to the law of cure itself. I originally learned the thing in conversation with Dr. Drysdale of Liverpool, though not formulated by him, and I doubt if Dr. Drysdale ever did formulate it. In my own mind I call it the *ladder of remedies plan*. It is what I often heard Dr. Drysdale call "a course of medicines".

* NOTE.—The indications for all these remedies may be found in any *Materia Medica Pura Homœopathica*.

I often compare the cure of a difficult case of disease to a game of chess in which you have king, queen, bishops, knights, rooks, and pawns, the various powers of which you must learn before you can play chess.

You do not expect to play chess without learning the game, but you do expect to be able to treat homœopathically without even knowing the homœopathic pawn! Hence my writing you all these reasons for my being a homœopath is a futile farce. I am, in fact, writing to you about chess without your knowing the pieces or even the board!! Still here is my thirty-seventh reason.

It is more than a dozen years ago that I, in the North, attended a very wealthy lady, about seventy years of age, for acute mania. The friends had, under the advice of the local practitioner, decided to send her to an asylum, but I objected to that course, being very sure she would never come out again. I have had charge of an asylum myself, and *know well* that, therapeutically, anyone that goes to an asylum is lost. They are treated with great kindness, and kept from harm and mischief, but as to curing them—well, the “mad doctors” never even try! and, indeed, it is useless to treat the demented allopathically. But good genuine Homœopathy would cure half the inmates of our asylums. You will question my statement, I dare say, but it is the bare simple truth all the same. It has been well and learnedly argued in theory and often proved in practice, as you may find for yourself if you will refer to our hereto-relative literature.

Homœopathic (and other!) practitioners are often hoodwinked by the personal surroundings of a patient, and to be pitchforked into a nest of unbelievers to cure a desperate case is verily no pleasant position to be in, as any physician of the homœopathic ilk knows but too well.

Now my patient had a lady companion who cast a withering glance at my humble self, and I knew instantly that *she* would balk me in my efforts to cure, unless I prevented it. So I informed her that either she or I must go, or she must solemnly promise to obey all my orders with regard to the patient, “for,” said I, “you do not believe in Homœopathy, do you?” “No indeed, I do not!” And that young lady’s look of scorn and contempt!

Thanks to *Baptisia* and other common homœopathic

remedies my patient made a complete recovery, and never had a relapse.

This is my thirty-seventh reason for being a homœopath, and if ever I lose my reason and become maniacal, great Father in heaven, send me a homœopathic brother, who will treat me as I treated Mrs. B—.

XXXVIII

If you really wish to know the remedies that “did the trick” in my last *reason*, you have only to look into our literature *with a humble receptive mind*, and you will soon spot them!

I must get on with my task, which is beginning to pall upon me, and I really cannot spare the time.

Not very long after I said good-bye to my ex-maniacal patient I was one afternoon sitting in my consulting-room, when who should appear on the scene but the before-mentioned lady companion of my said ex-maniacal patient.

“Doctor,” said she, “as you have cured Mrs. B—, I have been wondering whether you could also cure my sister, who is in an asylum suffering from mania; she is very bad, and the doctors say they have no hope of her, as she has been violent for so long.”

I enquired somewhat into the nature of the case, and gave as my opinion that Homœopathy could cure her.

The plan was communicated to the superintendent of the asylum, who called me some very hard names, the first of which was that I was a deceiver, and that I knew perfectly well that she would never get well. We required the help of three or four people to bring her in a special carriage, and her violence was dreadful for many weeks.

For more than twelve years this young lady has been as sane as you or I, and has during all that time fulfilled the ordinary duties of an independent English lady. If you care to know what medicines did the good, you will find the whole case reported in the *British Journal of Homœopathy*, about a dozen years ago. I remember figures with difficulty, so I cannot give you the exact date. The young lady went with her mother to see the said asylum physician after she was well, but this cure did *not*

lead him, so far as I ever heard, either to apologize to me for his vulgar slanders of me, or to investigate the system of medicine that helped me to cure where he failed, and which cure is my thirty-eighth reason for being a homœopath.*

XXXIX

The weather is bad to-day, so I am not busy in my chambers; sick people cannot get out in this dreadful weather, and that gives consulting physicians a little time to ruminate. However, a gentleman of seventy-nine, whom I have just converted to Homœopathy, was here just now, and his case must afford my thirty-ninth reason. It has the merit of being short and needing no particular introduction. He came to me last August, and what fixed my attention was his striking resemblance to the late Lord Cairns, who, by the way, was a homœopath, as was also Archbishop Whately, *the logic Man*. Fancy the great logician a homœopath!

Well, my patient had been to many eminent physicians in this London of ours for what he called "windy dyspepsia". He is in great and almost constant pain, full of foul flatus, constant diarrhœa, often involuntary, which is a terrible distress to him.

He was greatly improved in a few months, and the remedies which did it were *Arsenicum* 5, *Nux vomica* 5, *Sulphur* 5, *Lycopodium* 12, and *Colocynthis* 3x.

Said the old gentleman, somewhat sententiously, "These medicines seem to suit me."

XL

An officer in the army brought his twelve-year-old daughter to me on November 13th, 1886, telling me that she had something growing in her mouth. A similar growth had come a year ago, when his family surgeon excised it; in six months from the time of the operation it had grown again, making it difficult for the child to eat her food, as it caught the tongue and teeth, and then bled. This time the doctor ligatured it off thoroughly, leaving a hole, and informed the father that this time he hoped its roots were got rid of. Now it has grown again at the side of the said hole. On examining the mouth I find in its left side, just to the

* NOTE.—This lady still continues quite well (1896)

left of the frænulum linguæ, a warty fleshy excrescence, of the shape of a cock's comb, about a quarter of an inch broad at its base, and nearly a quarter of an inch high. Patient has normal teeth; the tongue is coated and she is very pale. I ordered *Thuja occidentalis* 30 internally, in infrequent dose, and a mouth wash of *Thuja* 0, two drops in a dessertspoonful of water night and morning; to keep it bathing the growth as long as possible, and then expectorate.

As this brought the growth down to the size of a pea, treatment was discontinued, but she then bit it on three successive occasions, whereupon it again took to growing, and on January, 1887, when I saw it, it was about as big as a horse-bean. This time I ordered *Sabina*, just as I had previously ordered *Thuja*. Under the *Sabina* patient took on a healthy look, but a small piece of the growth still persisted, when I ordered *Cupressus lawsoniana* in like manner as the *Thuja* and *Sabina* had been used. That was in March, 1887, and I did not see her again. But I met her father in October on another matter, when I enquired about the case, and he replied, "Oh, she is quite well; the lump has been gone a long time, but the hole is still there."

So if you ever get a little cock's comb growth in your mouth, take my advice, and have it treated homœopathically, for it is, as you see, much better than either excision or ligature, and you will thereafter have no "hole" to mark the *locus in quo*; and let the little tip stand as my fortieth reason for being a homœopath.

XLI

Deafness is a very troublesome thing to deal with, but it is worth while being a homœopath, were it only for the power it gives one over deafness. I never could make out what you allopathic fellows did for deafness beyond the everlasting syringing. I have peered about in the aural departments of big hospitals, and read the books of noted aurists, beginning with a namesake of my own, but could never find that they did any real good beyond clearing away mechanical hindrances. And even in Homœopathy it seems to me that our specialists rely far too much on cutting, scraping, and syringing.

I have very often cured deafness with the aid of Homœopathy, but most of the cases have needed so many remedies that I could not cite them without occupying too much space.

A lady of sixty, of the *Vielle noblesse catholique anglaise*, came to me in December, 1886, sent by her daughter, whom I had cured

of neuralgia. The daughter had neuralgia of right side of head very badly, that she thought originally came from a *coup de vent*. She spent the winter of 1885-6 in Nice, and one day sat next to a gentleman at the *table d'hôte*; they compared notes about their state of being, when it transpired that the gentleman had previously suffered from the very same sort of neuralgia, and in the identical spot, and that for many years until he came to me, when I (thanks to Homœopathy) cured him. I had intended giving the case of deafness as my forty-first reason for being a homœopath, but I will alter my plan, and instead give this cure of neuralgia.

The lady was forty years of age, and came to me in April, 1886; the pain was in the right side of brow, face, ear, and neck, and had been on ever since the preceding November.

Thuja occidentalis in a rather high dilution and infrequent doses cured the neuralgia in a few weeks, and the lady in question has thought this brilliant cure of her neuralgia of itself sufficient for becoming a homœopath, and if it be enough in itself to convert the sufferer to Homœopathy, it will surely be good enough to be one of my fifty reasons, and that the forty-first.

XLII

Having begun in my last communication to give you a case of deafness as my forty-first reason, I fell back on a case of neuralgia that had been suggested by it, and so that leaves the deaf lady to do duty now. Well, she came in December, 1886, because I had cured said neuralgia.

"You cured my daughter's neuralgia, so perhaps you can cure my deafness."

It was a case of long standing that had been under the best aurists, and they had syringed it and done their poor little best, giving temporary ease, but not touching the essence of the complaint, which was due to chronic inflammation and swelling of the walls of the external meatus on both sides.

In five months the lady was quite cured, and the remedies were *Thuja*, *Psoricum*, *Sabina*, and *Ceanothus*, and one other.

This lady has also become a homœopath, and now employs for her family the homœopathic practitioner living near her house, and her cure must stand as my forty-second reason for being a homœopath.

XLIII

I gave you the cure of a dermatitic state as my last reason for being a homœopath; nosologically we called it deafness. Let me advance a little on the merely inflammatory state, and give as my forty-third reason for being a homœopath the cure of a small growth. I will call it—

ENCHONDROMA INDICIS CURED BY *Calcarea fluorica* ALONE

A maiden lady of sixty came to consult me on October 13th, 1883, telling me she had a shiny swelling on her left index finger, which had been there for about eighteen months. The lump was hard and painful, and of about the size of a small split walnut, but rather flatter. Patient was very nervous and depressed.

R. Trit. 3x *Calcarea fluorica*. Six grains four times a day, dry on the tongue.

October 27th.—Very great improvement.

R. Rep.

November 3rd.—The cartilaginous nature is now clearly to be felt.

R. Rep.

10th.—The swelling continues to get softer.

R. Rep. (dry on the tongue).

17th.—Still progressing; softer and smaller; on its middle-finger side it has taken on inflammatory action, as if it were going to gather, being hot, red, and more swelled.

R. Rep.

24th.—The tumour is softer and smaller, and patient is beginning to bend her finger, which had previously become quite impossible.

R. Rep.

December 1st.—Still improving.

R. Rep.

15th.—Finger is much more normal in colour, and still progressing. Patient went on with the same remedy until a short way into the new year. I saw her the last time on December 29th, when she was nearly well.

If I remember rightly Grauvogl was the first to use and to recommend the fluoride of lime for enchondroma.

The interest of this case lies not so much in the importance of the tumour (it was only the size of half a walnut, or thereabouts), but rather in the fact that only one remedy was used, and no other, and no change was made either in diet or place of abode. The lady had a hard lump on her finger for eighteen months; she took a course of *Calc. fl.*, to the choice of which Homœopathy led me, and the lump went away.—Q.E.D.

XLIV

I have before pointed out to you that I love the grand independence conferred upon me by Homœopathy: when I have a difficult case I do not want to slide softly away from responsibility by the support of a consultative old foggy, whose brains have long since gone to sleep and whose *raison d'être* is only medico-social. I want to cure my patient, and were it only for the mental satisfaction. Now, guided by Homœopathy, and a wee bit of reasoning power, I can generally do this.

Read the following case of—

TRAUMATIC SWELLING OF RIGHT BREAST CURED BY
Bellis ALONE

I adduce the following case of a swelling in a young lady's breast, rather to exemplify in a neat way the curative range of the DAISY in the treatment of tumours.

No experienced practitioner will deny the important part played by bruises, blows, and falls, in the genesis of tumours and cancer; and hence our anti-traumatics ought to figure much more largely in our therapeutics of growths from blows. Before giving my case I will quote a very instructive note on this very question that appeared as leader in the first volume of the *Homœopathic Recorder* (Philadelphia), No. 4, July, 1886.

It runs thus:—

MALIGNANT GROWTHS

"In the preceding number of *The Recorder* there appeared three items concerning malignant growths, which deserve more than passing notice. One is the history of the development of a malignant formation as the result of the frequent mechanical irritation of a simple mole on the face, another recounted the cure of an extensive sarcomatous growth by an intercurrent attack of erysipelas, and the third contained the analysis of a series of cases of carcinoma in all of which there was antecedent injury by mechanical or chemical means; in the latter selection the writer asks in all seriousness: Is cancer, whatever its form, ever primary—i.e. does it ever originate without previous injury?

A negative reply to this inquiry is of the highest importance to those who believe in the curative effects of drugs. It deprives the disease-action of part of the mysterious, fateful quality so constantly associated in our minds with these affections, and which terrorizes to some degree the powers of the medical attendant. For we hold that the great majority of physicians, on discovering the existence of a suspicious growth, are strongly impelled to advise the use of the knife as the only sure treatment, notwithstanding that in cases of undoubted malignancy the value of surgical interference is greatly lessened by the relatively poor results as measured by the added years given to the patient.

Moreover, if the occurrence of an infectious inflammation of the skin has destroyed malignant disease-process in that issue, there is a fairly good basis for the view, reasoning by analogy, that a drug-disease—i.e. a disease produced by the action of a medicine—can, if affecting a part involved in the malignant process, cause similarly efficacious results.

In an admirable Report* on the Progress of Pathology, by J. H. Muser, M.D., Mr. Sutton, F.R.C.S., is given as authority for the following view: "Irritation, local or otherwise, affecting the tissue, may cause abnormal epithelial growths, which, rising above the general level, may produce a wart. On the other hand, the epithelial growths may dip into the sub-epithelial tissues, and, on account of lack of formative development, either from decline of vigour or general constitutional debility, the new tissue never develops functionally, runs riot, and originates tissues of low vitality—carcinomata. The conditions favourable to the development of carcinomata—debility, etc.—are absent in the young; hence in the young we have warts; in the old, cancers."

What, then, is the bearing of these facts upon the treatment of probably malignant tumours? Passing by the cures of warts by internal medicine alone, which almost every homœopathic practitioner has observed over and over again, we need only call attention to the cures, by the same method, of tumours of the female breast, an organ notoriously disposed to malignant neoplasms; here the action of *Conium* cannot be denied, and what is true of this remedy may be true of many others.

* "Phila. Med. Times," xvi., 484.

A thorough study of the symptoms of each individual case, with the view of finding the exact simillimum, the exhibition of the latter in different attenuations, if necessary, changing the remedy only when a change of symptoms demands it, and extreme watchfulness for involvement of the neighbouring glandular structures, make up, it appears to us, the duty of the physician. Whether he would be justified in holding out any hope of cure by internal medication after evidences of systemic infection exist, must be decided by his own experience; but, as there are always cases in which operation is inadmissible, or in which it will not be allowed, opportunities will not be wanting to continue treatment with the properly chosen remedy.

If statistics of our treatment can be collated and analysed, the results will, we feel sure, give encouragement to physicians and sufferers as well, and demonstrate anew, and in a strikingly brilliant manner, the value of our law of cure.

We earnestly hope, then, that those of us who hold hospital or dispensary appointments will endeavour to employ the method of internal medication in cases of malignant growths whenever it is fairly admissible to do so, and that records of cases containing diagnoses checked off as to their accuracy by every method known to medical science, together with the symptoms in full and the treatment used, may soon appear in our journals. Thus will be laid the foundation for a new and lasting monument to Homœopathy."

Without going so far as the author of this article, I must certainly say I attribute some of my success in the treatment of cancers and other tumours by medicines to a due recognition of the traumatic fact, not in diagnostics merely, but also in therapeutics.

Miss L. C., aged thirteen years, came under my observation at the end of July, 1879. About eight weeks previously a miserable lad in the street hit her on the right breast with considerable violence; from that time on, this breast became swollen and very painful, until at length she was quite unable to lie on her right side. Patient's mother was *poitrinaire*, as was also her brother, and my experience teaches me that the members of *poitrinaire* families are particularly liable to suffer from blows.

At first no notice was taken of the young lady's complaints, but week after week went by, and she persisted in referring to the pain, in her breast. Whether any domestic means had been

employed I do not now remember, but eventually I was sent for, as vague notions of tumour and cancer rendered the parents uneasy. On comparing the breasts, the right one was found to be by much the larger, being swollen and very tender.

I thought this a very proper case for testing the antitraumatic virtue of the old English bruisewort, and hence prescribed thus:

R *Tc. Bellis perennis* 3x. \mathfrak{Z} ij.

S.—Three drops to be taken in water four times a day. The result was a very rapid disappearance of pain and swelling, and in a fortnight patient could lie again on the right side. And a few days later an examination showed that the swelling had entirely disappeared.

Nothing whatever was applied to the part, no change was made in diet, mode of life, or place of abode, and as the thing had already existed for eight weeks, the positively curative effect of the *Bellis* can hardly be denied, which is the one point this case is meant to exemplify and to teach, and that because it is so very difficult to demonstrate positively the effect of any *one* remedy when the tumefaction has become a genuine neoplasia, or hyperplasia.* Too many of my cases prove this.

XLV

Just one other case of a new-growth as my forty-fifth reason for being a homœopath. You will see that the *general character* of a drug often helps us where our law becomes more or less *insaisissable*. It is a—

TUMOUR IN THE THROAT

A married lady of fifty-four came on August 8th, 1883, to consult me about a lump in her throat. In the left side of the top of the neck there was a hard body about the size of a hen's egg, but flatter. The tumour had been there for a very long time, and with it she had had much throat irritation. It was situated to the left and behind the larynx, but whether actually connected with the œsophagus or larynx, I could never quite satisfy myself. It moved up and down with the act of deglutition.

R Trit. 3x *Sul. iod.*, \mathfrak{Z} iv., gr. vj, ter die.

August 22nd.—No change.

R *Psor.* 30.

October 5th.—The throat—i.e. the fullness, uneasiness, pain and distress in the throat—is very much better, and the tumour has sensibly diminished in size.

R *Thuja occid.* 30

* In this case there was, of course, no hyperplasia.

November 1st.—The tumour is about half gone.

R *Psor.* 30.

29th.—The tumour about two-thirds gone ; general health good.

R *Thuja* 30.

December 21st.—There is some tickling in the throat. The tumour is larger again, and the patient feels choky.

R *Psor.* 30.

January 14th, 1884.—The tumour has again sensibly diminished in size.

R *Psor.* C.

February 8th.—Tumour still swollen.

R *Merc. viv.* 5.

March 3rd.—“ I feel the lump very much less, about half its original size,” said the lady. She has much rheumatism in ankles and knees.

R *Silicea*, 6 trit., in frequently repeated doses.

31st.—Has been visiting a friend suffering from consumption, and since then has spit a little blood-streaked phlegm ; has a good deal of tickling in the throat.

R *Psor.* 30.

April 16th.—No coloured expectoration for a week, and then very trifling ; the tickling in the throat is better, but the throat feels very rough. The tumour is rather smaller.

R *Sul. iod.* 3x, six grains three times a day.

30th.—No coloured expectoration for the past week ; the tickling in the throat is very much better, but talking brings it on. The tumour has lately not altered sensibly in size, but it is more self-contained, and one can now demonstrate that it is not connected with the larynx, being in the areolar tissue, behind and to its left. Has a good deal of rheumatism.

R *Tc. Condurango* 1, \mathfrak{z} iv. Five drops in water three times a day.

May 21st.—Thinks it is not so well ; tickling sensation in the throat is worse. Feels the spring. The throat is worse in the morning and when tired.

R *Thuja* 30.

June 10th.—Throat rather better ; has only had the coloured expectoration once, but the voice is hoarse, and she feels her throat weak. Has rheumatism in ankles and knees, worse after motion. The tumour is a trifle smaller.

R *Urea* 6.

June 11th.—More blood-coloured expectoration. Has had all the symptoms of a cold ; aching all over with tingling, and feeling giddy and ill ; aphonia ; much tenderness in the neck ; rheumatism better ; urine thick (unusual) ; violent tickling in the throat with scraping and dryness ; the tumour is nearly gone.

The throat symptoms are worse night and morning, and when she is tired.

R *Tc. Phytolacca decandra* 1, \mathfrak{z} iv., gtt. v., n. m.

August 6th.—Better in every way ; the tumour is barely to be found.

R *Rep.*

September 3rd.—Feels practically well. I can find the small remains of the tumour only with great difficulty.

R *Rep.* (at night only).

November 13th.—Still a little uneasiness in the throat.

R *Trit.* 2x *Sul. iod.*

28th.—Nearly well.

R *Rep.*

December 31st.—The tumour cannot be found, but she still complains of a husky voice.

R *Trit.* 4 *Kali brom.*

I did not see the patient again for some months, as the tumour had quite disappeared, and she herself felt quite well, but she came to me again on

April 10th, 1885, complaining of tickling and irritation at the old spot.

R *Psor.* C.

May 11th.—She feels easier in the throat, but the tumour is returning.

R *Trit.* 3x *Sul. iod.*

November 25th.—The lump is still increasing.

R *Psor.* C.

This lady came again on February 15th, 1886, and for the last time on April 30th, 1886, when I discharged her cured. I see her son occasionally on his own account, and thus know that she continues quite well, and has a very healthy general appearance.*

I am beginning to breathe more freely now, having only five more *Reasons* to bring forward. Confess candidly, do you not wish Homœopathy were socially *tres comme il faut*, and to be had for the asking ? A lady of high rank said to me three years ago, “ If you were *not* a homœopath, Dr. Burnett, I could make your fortune.” Said I, “ Well, my lady, I am very sorry not to enlist you in the laudable undertaking of making my fortune, which would be at least very nice for those dependent upon me ; but I *am* a homœopath, and fortune or no fortune, I thank God for this much of His truth.”

It is late and I am tired, but I trust you will be able to read my *cacography*.

* 1896.—No return of the tumour, and patient continues quite well of herself.

I have given you a good many details in my last three or four reasons to let you see the light in which I write so far as that is possible to you in your ignorance of the scientific treatment of disease in the sense in which I understand it. You will pardon the lately given journalistic quotation as bearing on the subject-idea; it is the only one I have inflicted upon you in this lengthy correspondence, and I will not trouble you with another.

Now, I have a partiality for cases with a good sound pathology that can be seen, felt, cut out, put into the scales and weighed! They seem so much more proof-affording than mere symptoms in given parts, as headache or neuralgia, as these often depart of themselves. But, generally speaking, you may bet on the permanency of a good solid tumour. As my forty-sixth reason, therefore, I must give you the notes, as short as may be, of a rather rare affection, viz. :—

TUMOUR OF RIGHT BREAST IN A MAN*

Although tumours of the breast are much more common in women than in men, still they do also occur in the breasts of males, more particularly in later life. Such a one is the following :—

On April 23rd, 1881, there came to me a rather tall, spare, cachectic-looking gentleman, a London professional man, of about seventy years of age, telling me that ever since the previous February he had been greatly worried, and this was followed by a sensitiveness in his left nipple, which soon passed off and went to the right nipple, wherein it still was. On examining the part I found it the seat of a hard, tumid mass of the size of a pigeon's egg. Patient first noticed it was swelled a month previously. It is not actually painful, but there is a sensation of fullness and uneasiness, and he cannot lie on it, hence it arrests his attention.

R *Psor.* 30, m. vi.; s. l. q. s., ft. pulv., tales xij., j nocte.

May 7th.—There is still a sensation of fullness in it; patient thinks it is softer, in which opinion I share. It is a little smaller. Since taking the powders he has had some bilious attacks.

R Rep.

May 21st.—It is much smaller; there is much less sensitiveness, and patient can now sleep lying on his right side, which was previously not possible.

R Rep.

* So rare are such cases that I have never seen but three such.

May 28th.—The sensitiveness is now confined to the nipple alone, still he can sleep lying on it. He is constipated, and his tongue is thickly furred.

R *Hydrastis canadensis* 3x, \mathfrak{z} iv.

S.—Gtt. v., nocte maneque.

June 14th.—The sensitiveness still continues, but it has very much decreased.

Rep.

July 2nd.—Less sensitiveness; tumour still decreasing in size; on the sternum, on a level with the nipple, there is a scabby eruption of the size of a threepenny piece, having a red ground, the rest being yellowish. He is still constipated.

R *Tc. Hydrastis canad.* 6, \mathfrak{z} iv., gtt. v., n. m.

July 23rd.—He has scabs* on the scalp; a yellow scab at the middle of the sternum; also on his hands. The nipple is no longer sensitive at all.

R *Tc. Thuja occid.* 30, in infrequent doses.

August 13th.—The tumour has disappeared, with the exception of one of the size of a hazel nut. There is still some scaly eruption on the sternum.

Psor. 30 (two to a month).

September 16th.—No trace of the tumour to be found. There is still a patch of reddish scaly eruption on the skin of the chest.

R *Tc. Chelidon. maj.* 3x, gtt. iij., nocte.

October 13th.—No trace of tumour; still a circular patch at mid-sternum. Bowels a little relaxed.

R *Trit.* 6, *Nat. sul.*

October 27th.—Well; and has a healthy complexion, whereas it was, at the beginning of the treatment, quite earthy.

Six years have elapsed since then, during all which time the patient has remained well of the tumour—i.e. it has never returned. Two or three times or more in every year the gentleman is in the habit of coming to see me, "To be kept in repair." Before I began the treatment I was importuned by his friends as to whether I was *quite* sure it was safe to forgo an operation, "which you know, Sir J.—says is the only *chance*!"

What did the friends say *after* the tumour was cured by remedies? Were they grateful? Perhaps; they have so scrupulously avoided the subject ever since that I have no means of knowing.

Nevertheless the tumour remains cured, and that is the main point.

If you care to know *my* opinion of the pathology of this

* I often notice scabby eruptions occur under the influence of our remedies given in cases of tumours, *when said tumours are diminishing in size.*

tumour, I wish to say I think it was *scirrhus*. That it was a very hard lump is quite sure.

Speaking biopathologically, *more meo*, the basis of the thing was PSORO VACCINOSIS.

Only four more *Reasons* are now due to you ; are you prepared to " come down the tree yet " ?

XLVII

One can hardly have to deal with a more formidable affection than *Angina pectoris*, and in its treatment Homœopathy can do great things. It is, however, a mighty mistake to treat the cases all alike, as quite a number of different diseases give rise to the usual anginal symptoms ; the cases must be diagnostically and therapeutically differentiated if they are to be really *cured*.

A short time since it was my duty to see a lady in Belgravia with *Angina pectoris* ; unwonted domestic drudgery, loss of loved ones, fright, loss of fortune, had led up to it.

Apart from the anginal attacks there was a chronic, constant pain across the præcordia, running away under the left breast. For years blisters had been applied at intervals with temporary relief, till they could no longer be borne. Patient was very depressed, sulky, and morose ; the menses suppressed. *Aurum metallicum*, 3 trituration, 6 grains every four hours, cured the constant pain in a week, and the anginal attacks have thus far not recurred, and patient smiles now and is bright. The menses have, however, not appeared, and for this she remains under treatment.

I do not expect you to realize the difference wrought by the Gold, inasmuch as in my allopathic days I should have flatly refused belief in my present statement. Hence if you now feel the same, I can sympathize with you, and I therefore will not insist further than to place it on record as my forty-seventh reason for being a homœopath.

XLVIII

Led by the law of likes, I have been able to do very satisfactory work with Gold as a remedy in disease ; if you care to know, I wrote a book on the subject some years since, wherein I say :—

The following is a case of dropsy of the lower extremities, which came under my observation two years ago.

I was fetched, I think it was one Sunday, to see a lady ; it was feared she was beyond recovery. I found my patient, a lady of about fifty, in bed ; her lower extremities were swollen, painful ; they pitted on pressure, and were worse at night, better in the morning. This œdema had been coming on for a week or two, but it had usually quite disappeared by the morning, and thus caused but very little anxiety, but now it had greatly increased even in bed, and very naturally was causing great alarm. Dropsy is almost always a grave symptom, though not always. In this case I think it was. There was a history of many illnesses, and altogether this drug-picture presented itself :—

1. There was dropsy, and patient had—
2. Great depression of spirits, amounting to—
3. Profound melancholia.
4. Then there was great difficulty of breathing, and
5. Weak pulse and feeble heart.
6. She was psoric, and had a good deal of—
7. Discharge from the nose, that at times contained some blood.

I gave her the *Muriate of gold* in the third decimal dilution, but I do not remember the exact number of drops or the repetition of the dose, but the dose was not less than one drop (it may have been two or three), and as often as every two or three hours, and given in water.

The case got rapidly well, all the œdema having permanently disappeared in less than a week. Eighteen months after this she informed me she had never since had any return of the dropsy, though her health was anything but good. This was only a recent case, and, though grave, was yet not severe as to the dropsy, but the despondency was almost a substantive malady.

In this case Gold acted as a veritable pick-me-up, and I submit that the remedy was homœopathically indicated, and the cure a homœopathic one ; about the dose I will not quibble ; with me the best dose is the one that cures.

This happened just ten years ago, and the lady is still alive and fairly well—so let it stand as my forty-eighth reason.

XLIX

In human life we have our favourites ; we have them in our families, and in therapeutics I have a great fondness for certain remedies, one of which is GOLD.

The allopaths say Gold is no medicine at all, because it is an insoluble metal ! That's what the best Professors of *Materia Medica* taught me ; it is fundamentally false all the same !

Oh, the silly, silly things they teach one at the schools !
What a frightful heap of old fossil beliefs !

For Gold is no mere function disturber, but a producer of organic change, and hence its brilliant effects in organic mischief. The vascular turgescence of *Belladonna* and that of *Aurum* are very different affairs.

The following interesting and instructive case once occurred in my practice, viz. —

RHEUMATIC ENDOCARDITIS IN THE COURSE OF RHEUMATIC FEVER

I was fetched one day in February by a gentleman in the city to see his wife, a lady of about fifty-five or sixty, who was lying very dangerously ill at the end of the third week of rheumatic fever. This gentleman, who is an old homœopath of thirty years' standing, and whose knowledge of drugs and disease is really remarkable for a layman, had treated patient himself, and with no inconsiderable success considering the severity of the case, but suddenly patient's condition became very alarming on account of the rheumatism having apparently seized upon the heart. I found this condition : patient was propped up in bed and breathing very hurriedly ; the lips bluish ; tongue dry and coated ; anxious expression of face ; puffy under eyes ; moist bubbling small râles all over chest, with cough ; pulse rapid, compressible, and intermittent ; action of heart floundering ; loud endocardial bruits ; slight dropsy of feet ; no appetite at all, could just suck a grape or sip tea ; profuse perspirations ; limbs swelled and painful, the joints almost as firmly locked as if ankylosed ; cannot move hand or foot for pain and from this swelled, inflamed state of the joints ; flesh of hands puffy ; bones of hand swelled, almost immovable, and tender.

I ordered *Aurum foliatum* (pure gold), 2nd trituration, very frequently. Alone and no auxiliaries.

Why did I order *Aurum* ? Because it affects the heart and respiration very much *like* they were affected in this patient, and because it, moreover, produces profuse perspiration, profound weakness, anorexia, and great anxiety. Then the bones were greatly affected.

February 18th.—A little easier. Rep.

19th.—Better in all respects. Rep.

20th.—Considerable improvement in the action of the heart ; breathing comfortable ; is out of danger. Rep.

22nd.—Continued improvement. Rep.

24th.—Quite comfortable. Continue with *Aurum* and take *Nat. sul.* 6th trit., in alternation with it. My reason for alternating was that I thought it imprudent to leave off the Gold, and yet *Nat. sul.* was now indicated.

March 2nd.—Is up sitting by fire. Appetite good.

6th.—Heart, joints, bones, and hands free from rheumatism ; is sitting by fire quite comfortably ; appetite good ; tongue moist but slightly furred ; feet swell a little towards evening.

This case so well illustrates the action of Gold on the organic tissue of the heart that I will leave it as my forty-ninth reason.

When I saw patient first I gave a bad prognosis, and had it not been for the Gold I fear it would have been realized. Auxiliaries did not do it, for I used none ; faith in the doctor did not cure her, for patient had never seen me before.

Patient's recovery was complete.

L

Here I am, my dear allopathic friend, arrived at my FIFTIETH REASON FOR BEING A HOMŒOPATH.

I mentioned as my forty-seventh reason a case of Angina pectoris cured by metallic gold, and awhile ago I stated to you that I considered the wide applicability, the immense range, the broad scope of Homœopathy afford ample reason for adhering to it as a practical system of curative medicine.

As my last-to-be-given reason, let me write off from my " Diseases of the Skin from the Organismic Standpoint " the following—premising, merely, that the remedy used was *Sulphur* 30 !—

ANGINA PECTORIS FROM SUPPRESSED SKIN DISEASE

One Sunday morning, some ten years ago, a gentleman ushered his wife into my consulting room because she had been taken with an attack of *Angina pectoris* in the street, on her way to church. Though only a little over thirty years of age, if so much, she had been subject to these attacks of breast-pang for several years ; they would take her suddenly in the street nailing her, as it were, to the spot, and hence she no longer went out of doors alone, lest she should faint away or fall down dead, as was apprehended.

An examination of the heart revealed no organic lesion, or even functional derangement, and I could not quite see why a comparatively young lady should get such anginal attacks. She had been under able men for her *angina*, but it got no better, and no one could apparently understand it. I prescribed for her, and saw her subsequently at her home, to try and elucidate the matter. I let her tell me her whole health-history from her earliest childhood. She said she was getting to the end of her 'teens, and was preparing to come out, but she had some cracks in the bends of her arms that were very unsightly ; these cracks

had troubled her from her earliest childhood. Erasmus Wilson was consulted ; he gave her an ointment which very soon cured her skin, and the patient came out socially, made a hit right off, and got married in due course. She had always been very grateful to Erasmus Wilson for curing her arms, for otherwise, "How could I have appeared in short sleeves?"

But there soon followed dyspepsia, flatulence, dyspnœa, and palpitation, and finally the before-described attacks of *angina pectoris* threatened to wreck her life. Moreover, she had borne one dead child. As I have already said, there was no discoverable cardiac lesion, and from the lady's health-history I gathered that this cure of her skin (though to me the one important point) was to her of no causal importance.

I gave my opinion that her skin disease had never been *really* cured, only *driven* in by Wilson's ointment, and that her angina was in reality its internal expression or metastasis. No one believed it, however. I began to treat her antipsorically, and very soon—I think it was less than a month from the Sunday morning visit—the old cracks reappeared in the bends of the elbows, and from that time on she had no further attacks of *angina* at all, and thenceforth she bore living children.

I am not ignorant of the range of the art-cure of disease in the wide literature of the world, and I affirm that outside of Homœopathy *such* grand therapeutic work has literally and absolutely no existence.

Should it be the will of the Most High that I live on in my present vigour, I shall have yet a great deal more to say to the world in regard to Homœopathy and other views of curative medicine ; if not, then let these *Fifty Reasons* be my legacy to my country and to my fellow-men the world over. I say this because I intend to publish them, omitting, of course, all recognizable reference to your individuality. And of you personally I have very small hope, for well do I know that though one rose from the dead yet would you allopaths *not* believe in any, and therefore not in my "Fifty Reasons for being a Homœopath"

Adieu sans revoir

Dr. J. Compton Burnett, was born in the year 1840. He graduated with honours from an orthodox medical school. While he was working as a house physician his original mind was occupied in devising better curative measures for the patients admitted. Here he relates his experiences and his conversion from allopathic drugging to the homoeopathic curative methods mentioned in the various cases.



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