

Such epidemics usually appear at intervals, varying from two to three years.

Symptoms.—Influenza generally commences with symptoms of cold in the head, sore throat, pains in the limbs, back and head, weariness, chilliness, followed by fever, and soon afterward by cough and uneasiness in the chest. The most characteristic symptom is the great debility which attends this affection. The pulse is feeble, there is often giddiness and faintness on sitting up; the spirits are depressed, and the sight and hearing are sometimes affected. Nausea and vomiting are more common than during ordinary colds. There is usually a remission of the symptoms in the morning, and an aggravation toward night. In some instances, instead of catarrhal symptoms, there are simply violent headache, flushed face, delirium, and fever. In other instances, nausea and vomiting; and in still other cases, diarrhoea or dysentery; and all these various affections apparently caused by the same epidemic poison acting on different individuals. The duration of an attack of influenza, when uninfluenced by treatment, varies from two or three days to two weeks. A cough sometimes remains after the other symptoms are removed.

Treatment.—At the very commencement of the disease if there is great prostration, chilliness, with or without nausea and vomiting, a drop of *Camphor*, repeated at the end of an hour, will sometimes relieve the symptoms, especially if the patient covers up warm in bed, and gets into a gentle perspiration. In case there is much fever early in the disease, six globules of *Aconite* or a drop of the tincture, dissolved in a glass of water, and taken at one dose, the patient covering himself up well in bed, will either relieve or lessen the severity of the symptoms.

Mercurius, vv.: Give this remedy once in two hours, if the above remedies fail to cure the disease, and there are great prostration of strength, pains in the bones of the face, sore throat, and especially if there are symptoms of dysentery or bilious diarrhoea, or the symptoms are aggravated by warmth.

Arsenicum may be given once in two hours instead of *Mercurius viv.*, if there is little or no soreness of the throat, but a profuse watery discharge from the nose, with burning and excoria-

tion of the nostrils, thirst, oppression of, and burning in the chest, great prostration of strength, aggravation at night and relief from warmth.

If there is much cough attending or following the disease, consult the section on cough and bronchitis, and select a remedy, and give either alone or alternately with either *Mercurius* or *Arsenicum*.

COUGH, AND COLD ON THE CHEST.

Cough may be caused by irritation or inflammation of any portion of the windpipe, bronchia or air-passages through the lungs, the air-cells, and substance of the lungs themselves, also of their external covering or the pleura. It may be caused by tubercles in the lungs, also by an elongation of the uvula or the little body which hangs down from the back part of the palate. The cough may be either acute or chronic, there may be fever attending it, or the patient may be free from fever. In this section I simply propose to treat of recent coughs, and those unattended by fever. If the disease is chronic, or of some weeks' duration, and the cough is hoarse or squeaking, and the voice is impaired, consult the section on chronic laryngitis, or chronic inflammation of the upper portion of the windpipe. If the disease is of weeks' or months' standing, and the cough at its commencement was short and hacking, and is attended with shortness of breath, consult the sections on consumption and chronic pleurisy. If the chronic cough seems to originate in the chest, and there is more or less soreness of the chest, with difficulty of breathing, and expectoration, consult the section on chronic bronchitis. If a recent attack of cough is attended by chills and fever, hot skin and frequent pulse, if the cough is hoarse, shrill, or squeaking, and the patient is an adult, consult the section on laryngitis; if a child, consult the section on croup. If the cough is not hoarse and is attended with high fever and oppression and difficulty of breathing, consult the sections on inflammation of the bronchia, lungs, and pleura. But when the cough has been of but few days' or weeks' standing, without fever, consult the remedies in this section.

A cold on the chest is a slight inflammation of the bronchiæ or air tubes, sufficient to cause a cough, which is at first dry, but afterward becomes loose, but without much if any fever, pain, soreness, or difficulty of breathing. It is a mild bronchitis, involving simply the mucous membrane of the air tubes, which, although sufficient to cause cough, is either not severe enough, or not sufficiently extensive to cause much fever, oppression or other alarming symptoms; still it differs from the most formidable cases of bronchitis only in the severity and extent of the diseased action, and of the symptoms, and not in the character of the disease. In all cases attended by fever and oppression of breathing consult the section on acute bronchitis.

Treatment of Coughs.—Give *Belladonna* once in two hours when the cough is spasmodic, not allowing time to breathe, or a short dry hollow cough, especially if it is caused by a tickling or itching in the throat or larynx, and if there is a sensation of dryness in the chest. This remedy is generally most important for dry coughs. It is sometimes useful when there is tenacious mucus expectorated, especially at night.

Dose, see page 7.

Chamomilla may be given once in two hours when there is a dry suffocative cough, caused by dryness, burning, and tickling in the throat and upper portion of the windpipe, and also when there is a tickling in the throat pit, and cough at night or during sleep. This remedy is often required for children.

Nux vom. : This remedy, like the two named above, is frequently required at the commencement of colds in the chest, when the cough is dry, and caused by tickling, roughness, and scraping, in the windpipe, with a spasmodic sensation, and when the cough is worse towards morning, and during the fore part of the day.

The following remedies, also, will often be found useful for dry coughs.

Rhus tox., when there is a rough scraping feeling, or tickling sensation, in the windpipe, and the cough is aggravated by cold air and relieved by exercise and warm air.

Lachesis, when the cough is worse after sleeping, also on arising from a recumbent position and in the cold air, and when it is

aggravated by the least pressure on the upper portion of the windpipe.

Arsenicum when there is burning in the chest, with a wheezy sensation in the lungs.

Hyosciamus when the cough is aggravated by lying down, and relieved by sitting up, and if there is dryness and heat in the air passages.

Ignatia when there is a constrictive sensation as if from the vapors of sulphur, or dust, in the air passages. If this remedy does not relieve, give *Calcarea carb.*

Cina when children are troubled with worms, and are subject to a dry cough.

Dulcamara : When there is a short, hacking cough, without or with the expectoration of tenacious mucus, caused by exposure to wet, and cool, damp air.

Ipecac : When the cough is short and dry, and excited by a tickling in the throat and upper part of the windpipe, with asthmatic or wheezing breathing.

For loose coughs, some of the remedies already named, especially *Belladonna*, *Dulcamara*, and *Ipecac*, will often be useful, particularly when the expectoration is tenacious and transparent, but when it is whitish or yellowish, they will less frequently be efficacious than one of the following remedies :

Bryonia : This remedy will sometimes be found of service at the commencement of a cough, when it is dry, but generally some one of the remedies already named will do better, but when there is a profuse, or more or less free, transparent, whitish or yellowish expectoration, especially in the morning, or after eating and drinking, and the cough is somewhat spasmodic, with pain in the sides or chest, give *Bryonia* once in four hours.

Pulsatilla may follow *Bryonia*, or be given instead of the latter remedy, when there is a free expectoration of yellow or white tasteless or bitter, salt or sweet tasting mucus. If there is nausea and vomiting, with a suffocative sensation, pain and soreness in the abdomen, or involuntary passage of urine while coughing, these are indications for this remedy.

In addition to the above, if the loose cough is not relieved, one of the following remedies will often cure it :

Phosphorus: Give this remedy when the expectoration is transparent, green, or white, and of a sweetish or saltish taste, and if the cough is excited by talking, laughing, or walking in the open air. When the latter symptoms are present it will often be useful even though the cough is dry.

Give *Stannum* night and morning, if there is a very profuse expectoration of transparent or whitish, sweet tasting mucus.

Give *Sulphur* for either a dry or loose cough, if it does not yield to other remedies, especially when there is a congested or full feeling of the chest, which seems to cause the cough.

Be careful and not change the remedies too often. Select your remedy with care and give it at least for twenty-four hours, and longer if the patient improves.

If you fail to relieve the symptoms, and the disease is without fever, consult the sections on chronic bronchitis, laryngitis, and consumption.

ACUTE BRONCHITIS.

(INFLAMMATION OF THE AIR-PASSAGES IN THE LUNGS.)

An ordinary cold on the chest is the lightest form of this disease, but that affection has already been noticed in the preceding section. It now remains to consider acute bronchitis in its severer forms. The causes of this disease are the usual causes of colds; such as sudden changes of temperature, exposure when the body is hot, etc. This affection may commence with a cold in the head, sore throat and hoarseness; in other cases without any such symptoms, a sensation of coldness, roughness, or dryness, is felt in the chest, near the top of the sternum or breast-bone; then follows a sensation of heat, tightness, soreness, or pain, in some part of the chest, usually beneath the breast-bone, with a cough, which is at first short and dry, but soon becomes deeper and more urgent, and accompanied by the expectoration of a transparent, glary, saltish-tasting mucus, which does not relieve

the cough, but seems to aggravate it by its irritating qualities. Chills, followed by fever, either precede, accompany, or soon follow, the above symptoms. The fever is generally worse toward evening, when the pulse is quick, the breathing short, the skin hot, the urine scanty and high-colored. If you apply your ear to the chest, at the commencement of the disease, you will hear a hissing or whistling sound, caused by the narrowing of the air-tubes from the swelling, the result of the inflammation; gradually this whistling ceases, and you hear a bubbling sound, caused by air passing through the bronchiæ which are partially filled with mucus. If you apply your ear over a healthy chest you hear, as the air passes through the bronchia, a sound similar to that caused by the passage of a gentle wind through the leaves of a tree. By applying the ear to the chest, both in front and on the back, and on both sides, from the top to near the lower ribs, you will be able to judge, with considerable certainty, as to the extent of the disease, and the danger, by the extent of the mucus rattling. If it is confined to one lung, there will not be much danger, and even if a part only of one lung is free, so that you can hear the natural breathing, the danger will not be very great; but if the mucus rattling is universal over both lungs, completely masking the natural respiration, the danger will be very great. If the disease is severe, and is not arrested by treatment, the difficulty of breathing increases, there is great oppression, the pulse is quick and weak, often irregular; there is great weakness, the countenance is anxious, pale, or partially livid, the mental faculties are confused or disturbed, the tongue becomes loaded with a brown fur, the thirst intense, and the urine scanty. In this severe form of the disease the patient may die between the fourth and eighth days, during a severe paroxysm of difficult breathing, or from a steady increase of the symptoms, or else he will gradually recover. When recovery is about to take place, the difficulty of breathing diminishes, and is chiefly confined to the evening the expectoration becomes less adhesive and frothy, and at length opaque; the fever abates, the countenance improves, and either the patient steadily recovers, or the inflammation passes into a chronic form. As the disease declines and the expectoration becomes whitish, if

you apply your ear to the chest, you will hear occasionally a clicking sound instead of a rattling of mucus.

In debilitated habits, where the countenance is pale, and the blood thin and watery, in adults and young children, and also in those who are debilitated from age, or chronic diseases, we sometimes have a very formidable variety of this disease without much febrile excitement. In such cases there is a profuse secretion of mucus into the bronchia, which causes great oppression of breathing, extreme debility, small, frequent, and often irregular pulse, and severe suffocative paroxysms. The expectoration in this form of bronchitis may be scanty at first, but soon becomes copious and frothy. Young children, when affected with bronchitis, swallow the mucus when it is raised into the throat by coughing and breathing, and do not eject it; it passes into the stomach and does no particular harm. Sometimes children have convulsions, twitchings, or symptoms of stupor, at the commencement of an attack of bronchitis, and if you neglect to apply your ear to the chest, you may suppose that the child has disease of the brain, until symptoms of threatening suffocation, purple countenance, small and irregular pulse, reveal the seat of the disease. In some of these cases there may be but little heat or fever.

Treatment of Bronchitis.—There are perhaps few diseases where the superiority of the homœopathic treatment over the cruel time-honored treatment of allopathy, is more marked than in the one under consideration. Very few, except the very aged or those debilitated by other diseases, or of bad habits, die from this affection; even young children, except those of very feeble constitutions, generally recover under a prompt and persevering homœopathic treatment.

Aconite: This is the first and most important remedy in all cases attended by any febrile excitement, or heat of skin. Give a dose every hour, and continue it for twelve hours. If at the end of this period, there is a violent dry cough, or spasmodic cough, or a sensation of dryness in the chest, or tickling in the throat, which excites cough, give *Belladonna*, and if fever continues, give it alternately with *Aconite*, one hour apart. *Belladonna* will still be indicated, when a tenacious and glary mucus begins to be expecto-

rated. This remedy is especially efficacious in the case of children, and it is indispensable when there are symptoms of congestion of the brain or convulsions.

Dose of this or of other remedies, see page 7.

Bryonia: If *Aconite*, or *Aconite* and *Belladonna*, fail to cut short the disease at the end of two or three days, *Bryonia* will generally be required, especially when there is a profuse transparent or opaque, whitish or yellowish expectoration, dryness of the throat, stitches in the chest, or a free perspiration. Give a dose of *Bryonia* once in four hours, and a dose of *Aconite* every hour between the doses of *Bryonia*, whenever there is any fever or heat of skin. As soon as the patient is free from fever during the forepart of the day and latter part of the night, omit *Aconite*, and only give it when there is fever. If, after the fever has been in a great measure relieved, the cough remains troublesome, with oppression of the chest, give *Phosphorus* during the afternoon and evening once in two hours, and *Bryonia* during the forepart of the day.

Tartar emetic: If the above remedies fail to check the progress of the disease, and the rattling of mucus is heard throughout both lungs, and there are great oppression and severe paroxysms of difficult breathing, give this remedy every hour. Also give it at the commencement of the disease, when in aged persons, or delicate young children, and persons debilitated by other diseases, there are great oppression without much fever, cool extremities and small pulse, and it fails to relieve the symptoms; give it alternately with *Bryonia*, one hour apart.

Sulphur and *Arsenicum* are our main reliance in desperate cases of this disease; they are rarely useful at the commencement; but when, notwithstanding the use of other remedies, there are threatening symptoms of suffocation, from an accumulation of mucus in the air passages, with rattling, give a dose of *Sulphur* every hour, until the patient has taken five or six doses, and if the symptoms improve, continue it; but if there is no improvement, give a dose of *Arsenicum* every hour.

For the declining state of the disease, after the fever has been relieved, and the expectoration has become opaque, whitish or yellowish, to prevent the disease from becoming chronic, give a dose

of *Sulphur* morning and noon, and a dose of *Pulsatilla* before tea and at bedtime.

Diet, &c.—The patient should be kept in an even temperature; the diet should be light, gruel, arrow-root, rice-water, soft boiled rice, and the like. For severe paroxysms of difficult breathing, wring large cloths, from warm water, as hot as the patient can bear, and apply them around the chest, and place over them dry flannel, and change them often.

CHRONIC BRONCHITIS.

This generally follows an acute attack, although the latter may have been slight in some cases, nothing more than the mild form of the disease, or a cold on the chest. The inhalation of air loaded with dust, frequently causes this disease; therefore, needle-grinders, stone-cutters, workers in hair and feathers, are very liable to this affection. In such cases, it generally begins with difficulty of breathing; and, after a time, cough and copious expectoration make their appearance; sometimes the latter is mixed with blood and matter, or pus.

The slighter forms of chronic bronchitis are indicated only by habitual cough and expectoration, which are increased by sudden changes of weather, and are most troublesome during the winter and spring. Aged persons are very subject to this disease during such seasons of the year. In severer forms of the disease there are paroxysmal cough, difficulty of breathing, soreness, tightness, and wandering pains in the chest. The expectoration is whitish, yellowish or greenish, and sometimes contains pus or matter. If the patient happens to get a severe cold, so as to cause an attack of acute inflammation of any part of the bronchia, tenacious transparent mucus will be mixed with the opaque matter. When the expectoration is very copious there are usually prostration of strength, wasting of flesh, hectic fever, and night sweats, and sometimes diarrhoea. This affection not unfrequently follows measles, scarlet fever, and small-pox, when the irritation of the air passages which frequently attends these eruptive diseases is neglected. If

you apply your ear to the chest of a patient suffering from chronic bronchitis you will hear over different parts mucous rattling, clicking and whistling sounds, which often change places.

Treatment.—Several of the remedies named under the head of acute bronchitis will be found useful in this form of the disease, especially *Bryonia*, *Sulphur*, *Phosphorus*, *Pulsatilla*, and *Arsenicum*.

Bryonia: Give this remedy morning and noon, and *Sulphur* before tea and at bed-time, if the disease has not been of long standing, and is the result of an acute attack; and if these remedies do not relieve the symptoms, omit *Bryonia* and give *Sulphur* and *Pulsatilla*, in the same manner. *Bryonia* is especially indicated for morning coughs and expectoration, with pains in the sides, shortness of breath, and cough after eating and drinking, with vomiting of food, and when there is an aggravation from taking cold.

Dose, see page 7.

Sulphur: Give a dose night and morning when there is a dry cough at night, without or with a copious expectoration of thick whitish or yellowish mucus during the day, cough and raising at night, stitches in the sides, a feeling of tightness of the chest, and when the symptoms are aggravated by every change of weather. *Pulsatilla* often follows *Sulphur* to advantage, especially in the case of females.

Phosphorus may be given three times a day when the cough is excited by walking in the open air, laughing, talking, or drinking; also for a dry cough, from tickling in the throat or chest; and also when there is a free expectoration of salt, sour, or sweet mucus or matter.

Stannum: Give this remedy night and morning, when there is a profuse, greenish, or yellowish expectoration, of a disagreeable, sweetish taste, or of a putrid taste and offensive smell.

Calcarea carb. may be given night and morning, when there is, in the early stage of the disease, a dry cough in the evening, or in bed, especially if the cough is caused by a sensation of tickling, as if from feather dust, or even breathing through feathers. Also when there is a profuse yellowish, perhaps offensive expectoration in the morning, or during the whole day, with difficulty of breathing.

Lycopodium: Give a dose night and morning, when there is a short hacking cough from tickling in the throat or windpipe; when deep breathing causes coughing; also when the cough is loose, with a profuse thick whitish, yellowish, grayish, or greenish colored expectoration, of a saltish taste, and there is soreness of the chest and shortness of breath.

Give *Lachesis* when the cough is worse after sleeping, and is aggravated by pressing on the windpipe.

Give *Sepia* night and morning, when the cough causes nausea and vomiting, and is dry and spasmodic; also when there is a copious yellow, green, salt, or putrid mucous expectoration morning or evening.

Give *Drosera* if, early in the disease, there is a dry hoarse cough, and if it fails, give *Spongia* or *Hepar sulph.*

Give *Silicea* when there is a profuse watery expectoration which is not relieved by other remedies. Pure air and sunlight are all-important in all chronic affections of the air passages, and of the lungs. If the patient can well avoid it, he should not occupy a room, even during the night, where the sun has not shone during the day, for the atmosphere will be unwholesome for him. He should frequently draw in a full breath, and gently thump the walls of his chest with his hand or fist; and let an assistant vibrate the chest, by pressing with the hand suddenly at any point where there is pain, soreness, or uneasiness. The patient should not be starved on miserable superfine flour bread, but should have good brown bread, which contains the dark nutritious portion of the grain.

For much valuable information, which is all-important to patients suffering from this affection, consult the work on the "Avoidable Causes of Disease."

HOOPING-COUGH.

This is an epidemic and contagious disease, and is generally confined to children; but adults, who have never had it, are liable to contract it, on exposure. Individuals rarely suffer from this dis-

ease the second time. The symptoms, at the commencement, are similar to those of mild bronchitis, or cold on the chest. There are generally more or less fever, some difficulty of breathing, and cough. The fever often gradually abates after a few days, but the cough becomes more troublesome, and begins to recur in paroxysms.

At the end of ten days or two weeks the characteristic symptoms make their appearance. Paroxysms of rapid coughing occur, which interrupt inspiration until the lungs seem to be exhausted of air, the upper portion of the windpipe is spasmodically contracted, the face becomes swollen and livid, and the patient seems on the point of suffocation, when the coughing ceases, the spasm gradually relaxes, and the air enters the larynx with a long crowing or hooping sound. In severe cases the blood sometimes starts from the mouth and nose during the paroxysms. The latter may return often, every half hour or hour, or not more frequently than two or three times a day. The disease generally reaches its height in about six weeks from the commencement of the cough, and terminates at the end of six weeks more, unless its duration is prolonged by colds, or an attack of bronchitis. During the winter or spring it is liable to be thus prolonged until warm weather. When the crude, nauseating and debilitating drugging of allopathy is avoided, and homœopathic remedies are carefully administered, there is very little danger in this disease; in fact, although the disease is very distressing, the lungs are generally developed and made stronger by the involuntary training which they receive.

Treatment.—As at the commencement of the disease there is generally more or less fever, give *Aconite* once in two hours, until the fever is lessened. If at the end of two or three days the fever has abated give *Belladonna* once in two hours for the cough; but if feverish symptoms still persist give *Aconite* alternately with *Belladonna*, at intervals of two hours. These remedies may be continued when the patient is awake, until the hooping commences, unless the cough should become moist, with vomiting of mucus or food, or a diarrhœa should occur, in which case give *Pulsatilla* once in two hours. *Carbo veg.* will sometimes be of service during

his stage if there is a convulsive cough in the evening, or before midnight.

Dose, see page 7.

When the hooping commences, if the patient has been taking *Belladonna*, let him omit it, and give him *Cuprum* after every paroxysm of coughing; if there is fever, headache, or symptoms of convulsions, give a dose of *Belladonna* two or three times a day, in addition to the *Cuprum*, but not within half an hour of the doses of the latter remedy. If, at the end of four or five days, *Cuprum* makes no impression on the severity or frequency of the paroxysms, omit it, and give one dose of *Drosera*, and repeat it once in twenty-four hours, until there is some improvement, but as soon as there is a perceptible change for the better, do not repeat the remedy as long as the patient improves, but if improvement ceases repeat the dose.

If the above remedies do not lessen the severity of the disease give *Veratrum* after every paroxysm, especially if there is vomiting and great debility. In obstinate cases give *Tartar emetic* after every paroxysm, and if it does not relieve the symptoms, give a dose of *Sulphur* every night, and *Belladonna* once in two hours during the day, until the patient is well.

The neck, shoulders, arms, and legs, should be well clothed, and the feet kept dry with good thick-soled shoes.

PLEURISY.

The pleura is the smooth membrane which covers the external surface of the lungs and lines the walls of the chest, and inflammation of this membrane is called pleurisy.

Symptoms.—A sharp, cutting pain in the side, usually a short distance below the nipple, but sometimes lower, occasionally at the lower margin of the ribs, which restrains every attempt at full inspiration, and renders the breath short and often catching, is frequently the first symptom; sometimes chills and fever precede the pain; if not, they may accompany or they soon follow the attack. There is generally a short, dry, hacking cough. Even

without treatment the pain generally grows less at the end of two or three days, but the difficulty of breathing often increases, owing to the filling up of the pleura, which is a closed sac, with the watery portion of the blood and lymph, which are poured out on its surface when this membrane is inflamed. Without treatment the fever generally grows less at the end of four or five days, and sometimes is quite moderate; perhaps the patient has little the forepart of the day even when the effusion is increasing, with increased oppression of breathing. If at the end of two or three days you apply your ear to the walls of the chest on the diseased side, when the patient is sitting up, you will not hear, over the middle and lower portion of the chest, the gentle murmur caused by the passage of air through the bronchiæ as the patient breathes, which you will hear on the well side, and if you percuss or strike the chest with the end of your fingers you will find dullness on the diseased side, when compared with the well side, caused by the accumulation of fluid in the pleural sac. If the patient recovers, the fluid is gradually absorbed, but the lymph which is poured out on the surfaces of the pleura is not absorbed, and as the two surfaces covered with this lymph come in contact as the fluid disappears they unite and form adhesions, but the latter do not usually seriously interfere with breathing after a few weeks or months. The patient generally recovers, but he may die, or the disease may pass into a chronic form, and the whole side of the chest become filled with fluid, and the walls of the chest may even become distended, the spaces between the ribs pressed out, and the heart crowded out of place. There will be absence of respiration and dullness on percussion over the whole side.

Sometimes we have what physicians call latent pleurisy, where there is no pain, and but little fever or cough, but general debility, and slowly increasing shortness of breath and oppression. This form of the disease can only be detected by applying the ear and by percussing the chest.

False pleurisy, which is nothing more than a rheumatic or neuralgic pain in the chest, often bears a very great resemblance to the genuine disease; but there is in such cases, generally no chills or fever, and no effusion of fluid follows, and there is usually no

cough. If in such cases you rub hard with the ends of your fingers on the spaces between the ribs over the seat of the pain, it will almost always increase the suffering to a far greater extent than in pleurisy.

Treatment of Acute Pleurisy.—Wring a large towel from cold water and place it over the diseased side, extending from the breast bone to near the spine, cover the wet cloth with five or six thicknesses of dry flannel, and pin a dry towel around the body over the whole so as to exclude the air. Wet the towel once in six or eight hours.

Aconite: Give a dose of this remedy every hour in all cases where there are any chills, heat of skin or fever; even if there is but little fever this remedy should be given. As soon as the skin inclines to become moist lengthen the intervals between the doses to two hours. Continue this remedy for twenty-four hours, then give a dose of *Bryonia* once in six hours, and if there is much fever or heat of skin, give a dose of *Aconite* every hour between the doses of *Bryonia*; but if the skin is moist, and there is but little heat about the body, give the *Aconite* but once in two hours. Continue the above remedies until the fever is gone, or nearly so; then give *Sulphur* once in two hours during the afternoon and night and *Bryonia* at intervals of two hours during the latter part of the night and forenoon, whenever the patient is awake. Continue these remedies until the patient is entirely relieved from all cough, soreness and shortness of breath. The above remedies will rarely fail to cure this disease; but in case of failure consult what is said as to the treatment of chronic pleurisy below

Dose of the remedies, see page 7.

Treatment of Chronic and Latent Pleurisy.—Commence the treatment with *Bryonia* once in two hours during the forenoon, and *Sulphur* once in two hours during the afternoon and evening, and continue these remedies as long as there is any improvement. If at the end of three or four days the patient is not better, omit the *Bryonia* and give *Arnica* during the forenoon once in two hours, continuing the *Sulphur* during the afternoon and night when the patient is awake. Continue these remedies as long as there is improvement. When there seems to be no change for the better omit

the above remedies and give *Arsenicum* once in two hours; if the patient improves, lengthen the intervals to four hours. *Hepar sulph.* or *Sulphur.* may in some cases be required after *Arsenicum*. If the above treatment fails, as it rarely will, to cure chronic pleurisy, send for a homœopathic physician, and not for an allopathist, for, according to my experience, this disease can very generally be cured by the use of homœopathic remedies, carefully and perseveringly administered, provided an opening is not made to draw off the fluid, for the fluid is almost always simply serum or water containing shreds of lymph, and can be absorbed; whereas, if an opening is made, more or less air is quite sure to be admitted, when the whole cavity of the pleura will be converted into one vast suppurating or maturing surface, and the discharge will be quite sure to wear the patient out with symptoms of hectic fever. After the fluid has been absorbed in cases of chronic pleurisy, the side of the chest affected is liable to become contracted, from the lung being bound down by lymph, which has been organized on its surface during the long compression by the fluid, but the patient may live and enjoy good health with the use of only one lung.

Treatment of False Pleurisy (Pleurodynia).—Give *Nux vom.* once in two hours. If this remedy fails, give *Arnica*, one dose, and if at the end of twelve hours the disease is not relieved, give *Bryonia* once in four hours. In the case of nervous females give *Pulsatilla* instead of *Nux vom.*, and if it does not relieve the symptoms, give *Arnica* alternately with it, two hours apart.

The diet in cases of pleurisy should be light during the febrile stage, nothing but gruel, rice, barley water, and the like.

INFLAMMATION OF THE LUNGS (PNEUMONIA).

This disease consists of inflammation of the air cells and substance of the lungs. There is almost always more or less inflammation of the bronchia, and sometimes of the pleura.

Symptoms.—Chills followed by fever generally precede, accompany, or soon follow the local symptoms. In persons of full habit, the fever is intense, skin hot, face flushed, with red eyes and more