

discharge from bleeding piles, give *Nux vomica* every hour, and a dose of *Sulphur* at night.

Give *Arsenicum* if the patient has been suffering from chronic inflammation of the stomach, and there is burning pain or soreness. In such cases *Carbo veg.* may follow *Arsenicum*, or be given alternately with it at intervals of two or three hours. In any case if the patient loses a large quantity of blood, and becomes faint, give *China* every half hour until the latter symptom is relieved. Quiet and rest of mind and body are essential.

Let the diet be light and unirritating for some days; all drinks should be cold; and a cloth wrung from cold water and placed over the stomach during the attack of hemorrhage will be useful.

DYSPEPSIA OR INDIGESTION.

This affection is often confounded with chronic inflammation of the stomach, but it is very important to distinguish between these two diseases, as in one case the stomach is simply weakened and unable to perform its functions from this cause; whereas, in the other it is owing to undue excitement that this organ fails. The following are among the causes of this disease: Sedentary habits; intense and protracted study, or absorbing mental emotions, by calling off the nervous energy from the stomach, cause this disease; also errors of diet, a change from an active to a sedentary or inactive mode of life, over-eating, the use of alcoholic liquors, high-seasoned food, spices, tea, coffee, and narcotics. Beyond all question the use of tobacco is one of the most fruitful causes of the prevalence of this disease among Americans. Let every dyspeptic who uses this poisonous weed read the chapter on tobacco, in the author's work on the "Avoidable Causes of Disease," and let every parent who cares for the health, morals and lives of his sons, place that work in their hands if possible, before they have commenced its use, as prevention is far better than cure.

Symptoms of Dyspepsia.—A feeling of vague uneasiness in the region of the stomach, which does not amount to pain, but is often worse than pain, is one of the most prominent symptoms.

This symptom often extends to the chest, sides, and even shoulders, and upper parts of the arm, especially on the left side. The uneasiness is often greatest when the stomach is empty, and is frequently changed after eating to a feeling of fullness, distension, and weight. Patients frequently strike themselves over the stomach and sides, so as to change the sensation. Sometimes there is a slight sensation of heat, or burning and gnawing pain, which arises from irritation of the stomach. Not unfrequently there are spasmodic or neuralgic pains and distension from flatulency. The appetite may be impaired or wanting, craving or perverted. There is frequently a gone or sinking sensation at the pit of the stomach, especially when the disease has been caused by the use of tea. Eructations of wind, and regurgitations of sour, bitter, acrid, oily, or offensive liquids, are common symptoms; there may be water-brash or vomiting. Heaviness of the head, dizziness, headache, perverted visions; ringing in the ears, pains between the shoulders, and in various parts of the body, not unfrequently occur; also stricture or uneasiness about the throat, and irritation of the throat and larynx, with a frequent inclination to clear the throat, and a sensation of coldness between the shoulders, are not uncommon symptoms. The patient is apt to be low-spirited, irritable, anxious, fretful and apprehensive. Not unfrequently patients imagine themselves affected with consumption or disease of the heart, and the frequent occurrence of palpitation and irregularity of the pulse, tend to confirm them in their impressions. Unpleasant dreams disturb the sleep; the bowels are generally constipated; the surface of the body dry and of unequal temperature. The feet and hands may be cold or hot, and sometimes there is a profuse perspiration. The urine may be almost colorless, or scanty and high colored. The symptoms above enumerated are not all present in every case.

As has been stated, it is important to distinguish this disease from chronic inflammation of the stomach, for the two affections require very different treatment. In cases of chronic inflammation, the pain is generally more severe, and there is greater tenderness, on pressure, over the stomach; vomiting is more common, and the pulse more frequent, than in dyspepsia. The tongue, espe-

cially its edges, is often red, which is seldom the case in dyspepsia. When there is mucus, blood, or dark matter, like coffee grounds, thrown up by vomiting, inflammation may be inferred; and the same is true when hot or stimulating drinks increase the uneasiness in the stomach, for such drinks generally relieve the dyspeptic, and food is more acceptable to the latter. Diarrhoea is more frequent in cases of chronic inflammation, than in dyspepsia, and the same is true of febrile excitement.

Treatment.—As in this disease the gastric juice is either lessened in quantity or deteriorated in quality, which allows the food to be decomposed instead of being digested, it is all-important that the patient abstain entirely from drinking with his meals, so as not to dilute the gastric juice. The patient should also abstain from drinking for one hour before eating, and for at least two or three hours after eating. He may gratify his thirst at other periods. We can only expect to permanently cure this or any other chronic disease, by removing the cause; therefore the reader will do well to consult the chapters on the use and abuse of the digestive organs, the conditions requisite for physical development and preservation, excessive labor, and amusements, in the author's work on the "Avoidable Causes of Disease," and he will there find information more valuable to him than all the medicine in the world. In this connection there is space for only a few hints. The patient should avoid all substances which are of difficult digestion, or which disagree with him, and he must not be constantly trying different articles of food. As a general rule, he should avoid all vegetables with the exception of well-boiled rice, Irish and sweet potatoes, and these should be cooked dry and mealy. Sweet peaches and ripe blackberries may be used with moderation. Good fresh milk can generally be taken, unless it disagrees with the patient. Sweet cream and good fresh butter, *cold*, may be used moderately with stale brown bread, rice, or potatoes. Also tender mutton, beef, venison, turkeys, chickens, partridges, and some of the smaller birds, if kept some time before being cooked, may be used; and even soft boiled eggs are often allowable. Salt may be used moderately, but all other condiments should be avoided. Among the above articles the patient will find all he needs,

and he must confine himself strictly to the above list, and above all things shun the use of stimulating drinks, for if they afford temporary relief, they are sure to weaken the stomach still more. Cold water is the best drink, or milk and hot water, only moderately sweetened, weak cocoa, and at most, weak black tea, drank a couple of hours before eating. He should eat at regular hours, never more frequently than three times a day, and eat slowly, and masticate or chew his food well. If the disease has been caused by sedentary habits, severe study, or mental anxiety, active exercise in the open air and sunlight are all-important.

Nuxvom.: When this disease occurs in persons of sedentary habits, or those who have been given to free indulgence in the use of stimulants or condiments, or are subject to costive bowels, with or without piles, a dose of this remedy every night will often afford great relief. If there is a gnawing sensation in the stomach, craving or aversion to food, bitter eructations, headache, drowsiness, and mental depression, these are still further indications for *Nuxvom.* A dose may be given every night for a week, then omit for two or three days, after which give a single dose of *Sulphur*, then omit all medicine for one week, after which give *Nuxvom.* again, and follow it by *Sulphur* in the same manner, and continue these remedies as long as there is any improvement.

Dose of the above or other remedies, see page 7.

Pulsatilla is especially suitable for females, and it is also useful for males when there is great acidity of the stomach or acid eructations, and when there is little or no thirst. A dose may be given every night for a week, then after omitting the remedy for two days, give a dose of *Hepar sulph.* and wait a week; then give these two remedies in the same manner again, and continue them as long as there is any improvement.

China may be given every night if the disease has been caused by the loss of blood, or secretions from the blood; also if the patient is constantly troubled with flatulency or wind.

If the above remedies do not entirely relieve the symptoms give a dose of *Calcareo carb.* once a week. Consult a homœopathic physician, if one is accessible.

CHOLERA MORBUS.

This disease is characterized by vomiting and purging. It may commence suddenly without premonitory symptoms, or it may be preceded for hours and even days by a feeling of weight or uneasiness of the stomach, with or without the same sensation in the bowels, and with a coated tongue. Long-continued hot weather, especially with cold nights, predisposes the system to this disease. It may also be caused by overeating, improper food, and by poisonous substances taken into the stomach. There may be severe spasmodic pains in the stomach, and colic pains in the bowels, or there may be very little pain. At first, simply the contents of the stomach and lower bowel are discharged, but bilious matter, green or yellow, and more or less acrid, soon makes its appearance. If the disease is not soon relieved, the pulse becomes feeble, the countenance pale and shrunken, the skin cool and damp, the urine scanty, and sometimes painful cramps appear in the muscles of the abdomen and extremities. If the disease is neglected, alarming symptoms may ensue, such as brown, blackish, or bloody discharges, great thirst and burning in the stomach and bowels, small, frequent, and irregular pulse, short and frequent respiration, cold extremities, sunken eyes, cold sweat, hiccough and distention of the abdomen, with perhaps a cessation of the vomiting; and, if not relieved by treatment, the patient may sink and die within a period of from twelve or twenty-four hours to two or three days, often retaining his mental faculties until the last. In some severe cases, the discharges are colorless or whitish, almost like those in Asiatic Cholera. In some cases a diarrhoea follows the attack, and in some instances a gastric or typhoid fever seems to result. Cholera morbus is rarely fatal in persons of a good constitution, especially under homœopathic treatment, as the disease is generally soon relieved by our remedies. When the difficulty has been caused by offending matters taken into the stomach, as soon as they are evacuated the patient is often relieved, even without medicine, but in other instances the symptoms continue unabated. Vomiting and purging are not unfrequent attendants upon other diseases, such as bilious fever, inflammation of the stomach, bowels, and liver, but such

cases may be distinguished from the disease under consideration by the presence of fever, headache, tenderness and soreness of the stomach and bowels; whereas, in cholera morbus there is no fever, especially at the commencement of the disease.

It is not always so easy to distinguish cholera morbus from the effects caused by various irritating poisons such as *Arsenic*, *Tartar emetic*, *Corrosive sublimate*, or *Calomel*. If this disease is not prevailing, and the attack is sudden, without premonitory symptoms, and has not been caused by any irregularity in diet, such as over eating or drinking, or the use of unusual articles, it is well to bear in mind the possibility of the disease having been caused by the accidental or intentional use of a poisonous substance. In all cases where you have the least reason to suspect that the disease has been caused by a poison, carefully save all the discharges, give the homœopathic remedy or remedies as directed below, and send immediately for a physician. If you know that the disease has been caused by a poison, consult the section on poisons, and send for a physician.

Treatment of Cholera Morbus.—When there are premonitory symptoms of this disease, such as a coated and yellow tongue, weight and uneasiness, or pain in the stomach or bowels, give a dose of *Chamomilla* every hour until the symptoms are relieved. It may still be useful after vomiting and diarrhoea have commenced, if there is great pain.

Dose of this or other remedies, see page 7.

Ipecac: Give this remedy every half hour, if there is great nausea and vomiting, with profuse watery diarrhoea, especially if the disease has been caused by overloading the stomach, or by indigestible substances. If there is severe pain in the bowels, give it alternately with *Chamomilla*, one half hour apart. If the disease has been caused by cold or acid drinks, acid and unripe fruits, or if there is great acidity of the stomach, give *Pulsatilla* and *Ipecac*, alternately, one half hour or hour apart, according to the severity of the symptoms.

Veratrum: This is by far the most important remedy in very severe cases of this disease; and in lighter cases, when the above

remedies fail to relieve them, within a few hours, give *Veratrum* every half hour, when the evacuations are very profuse, with or without pain, especially if there are cramps in the calves of the legs, hollow and sunken eyes, and cold extremities. It may be given alternately with *Arsenicum*, in severe cases.

Arsenicum: Give this remedy every half hour, if *Veratrum* fails to check the progress of the disease, and the eyes become sunken, the extremities cold, and there are great thirst and a burning sensation at the pit of the stomach. If, during the progress of the disease, there is very intense pain in the bowels, a dose or two of *Colocynth* will often relieve it.

China may be given night and morning, after the symptoms are relieved, for the debility which remains.

Diet, &c.—During the continuance of the disease, nothing should be taken into the stomach but rice-water, arrow-root, toast-water, and boiled water, and the like unirritating drinks. When there is much pain, cloths may be wrung from warm water, and applied over the stomach and bowels.

ASIATIC OR EPIDEMIC CHOLERA.

An attack of this disease is generally, but not always, preceded by certain premonitory symptoms, such as a furred tongue, poor appetite, impaired digestion, thirst, uneasiness, distention, and weight of the stomach and bowels, with general weakness. A profuse, watery, *painless* diarrhoea, with rumbling in the bowels, generally precedes the attack of fully-developed cholera, for from a few hours to several days. This diarrhoea is attended with so little suffering, that patients are exceedingly liable to neglect it until attacked by cholera. If a watery diarrhoea is attended with pain, there is far less danger of an attack of cholera, than when it is painless. During the prevalence of an epidemic, overeating or irregularities of diet, exposure, mental excitement or fatigue, may induce an attack, or it may come on without any exciting cause. A feeling of weakness, and sometimes chills, copious sweats, feebleness of the pulse, disordered vision, dizziness, and ringing in

the ears, are symptoms which frequently occur about the commencement of the attack; or without any premonitory symptoms except the painless diarrhoea, and occasionally even without this, the patient is seized with violent vomiting and purging, with severe pains in the abdomen, neuralgic or cutting sharp pains in different parts of the body, and cramps in the muscles, especially of the arms and lower extremities. The passages from the bowels soon become thin, watery, and whitish, resembling thin gruel or rice-water, which, when allowed to stand, separates into a colorless fluid and a white, insoluble matter, which settles in the bottom of the vessel. In some instances the passages are brown, and in mild cases, when the disease is abating, they are sometimes tinged with bile. The matter vomited may be white and glairy, or similar to the stools. The evacuations are often very copious, and apparently without much effort, and rapidly exhaust the system of its fluids. The features become shrunken, the extremities cold, the pulse small, and the fingers and toes often distorted by cramps in the muscles of the arms and legs. If the disease is not arrested, the pulse becomes very feeble, and almost imperceptible at the wrist, the skin begins to assume a leaden or dark purple color on the face and extremities, and is shrunken and inelastic, and on the hands and feet wrinkled and shrivelled as if long soaked in water. The eyes are deeply sunken in their sockets, and surrounded by a livid circle. The urine is scanty and sometimes suppressed, the thirst intense, with a constant desire for cold drinks, and also for fresh air. The respiration is short, hurried, and oppressed, and there are great restlessness and extreme prostration of strength. The patient often complains of great heat over the entire body, when the surface is very cold to the touch. There is more or less dullness of the mental faculties, although the mind is generally free from any derangement. The patient usually gives himself very little uneasiness about the result of his disease.

We have now followed the symptoms up to the beginning of the collapse, when if the patient is not relieved, the pulse becomes imperceptible, the voice feeble, the breath cold, the respiration very feeble, and the urine suppressed. The vomiting and purging may

continue or cease some time before death. The cramps may abate some time before the patient dies or not until after respiration ceases. Sometimes stupor precedes the fatal termination, in other instances the patient is conscious to the last. Death may occur within from four to twelve hours from the commencement of the attack, but more frequently not sooner than from one to three days. The patient may recover from any stage, even from the collapse; the appearance of bile in the passages is generally a favorable sign. If the patient has been very much reduced by the evacuations when reaction becomes established, more or less febrile excitement is apt to ensue. This is generally of a typhoid character, and during its continuance there is a great tendency to congestion of the brain, giving rise to headache, delirium, convulsions and stupor. A fatal collapse sometimes occurs without vomiting, and in some instances vomiting occurs without diarrhoea. Occasionally, but very rarely, the collapse almost immediately follows the attack. The cholera is an epidemic disease, and nothing is known in regard to the poison which causes it. The intemperate and those who use alcoholic and fermented drinks even moderately, are more liable to have the disease than others; but while the temperate should never commence the use of such drinks during the prevalence of the disease with any thoughts of thereby preventing it, as they will be far more likely to contract it if they do, the intemperate and those who have been accustomed to their use should simply use them more moderately, but not break off entirely until the epidemic is over, as the sudden change may cause an attack.

Preventive Treatment.—Eat temperately of vegetable and animal food, if you have been in the habit of using both; simply shun indigestible food, unripe fruits and crude vegetables, small beer, cider, ice-water, ice-cream, &c. Follow the following directions and you need have very little fear of being attacked during the prevalence of any epidemic of cholera. Avoid excessive physical or mental labor, and all undue mental excitement. Take *Veratrum*, *Cuprum*, and *Sulphur*, in the order they are named, at bedtime, two days apart; and after taking each of them twice, lengthen the intervals between the remedies to three or four days; and then

continue them to the end of the epidemic. Take four globules of either for a dose.

Treatment of the Painless Diarrhoea which precedes Cholera.—Never neglect such a diarrhoea during the prevalence of cholera, for a single hour, but resort immediately to the use of homœopathic remedies, which, if carefully selected and promptly administered, will rarely, if ever, fail to cure the diarrhoea, and thereby prevent the cholera; so that very few homœopathic patients can ever have this disease, except through gross neglect. Take no other than homœopathic remedies, either for this diarrhoea or for the cholera. It is all-important that you shun all allopathic nostrums and quack medicines, for a single dose of a remedy which contains any of the preparations of opium, will often so far paralyze the system that it will be impossible to get a sufficiently prompt action from our remedies, to save the life of the patient. All experience shows that from one tenth to one half of all the patients who take opium, in any form, during a well-marked attack of cholera, will die, in spite of any known treatment.

Arsenicum is perhaps more frequently required for this diarrhoea, than any other remedy, especially when the passages are very profuse and watery, with or without much pain, and if there is great thirst, give a dose every hour. If there is any nausea or sick stomach, or if the diarrhoea is very painful, with profuse evacuations, give *Veratrum* alternately with *Arsenicum*, at intervals of half an hour.

Phosphorus: If the passages are light colored and nearly painless, with moderate thirst, give a dose of this remedy once an hour, but if it does not relieve the symptoms within a few hours, give *Arsenicum*.

China may be given once in two hours, in obstinate cases, when the passages are painless and watery, and there are rumbling and distention of the bowels with wind. Relief will be more certain and speedy, if the patient keeps quiet, and covers himself up well in bed.

Treatment of Cholera.—At the commencement of the attack, if there are great weakness, or chilly sensations, copious sweats, and feeble pulse, disordered vision or dizziness, give either six globules,

or a drop of the *Spirits of camphor*, every five or ten minutes, until such symptoms are relieved; at the same time cover the patient up in bed, and apply hot dry flannels to his feet, so as to get him into a gentle perspiration if possible. This course will often check the disease in an hour or two, but if it should not, give

Veratrum: This is the chief remedy at the commencement of the attack, after *Camphor*, especially when there are profuse vomiting and purging, coldness, blueness, cramps, and rice-water passages. Repeat the dose once in fifteen minutes.

Dose of this or any other remedy, see page 7.

Cuprum may be given alternately with *Veratrum*, at intervals of fifteen minutes, if, notwithstanding the use of that remedy, the patient begins to be troubled with cramps in the extremities, and distortion of the fingers and toes.

Arsenicum: If, in the course of three or four hours, there is no improvement (and even sooner if the patient seems to be getting rapidly worse), omit the *Cuprum* and give *Arsenicum* alternately with *Veratrum* at intervals of fifteen minutes or half an hour, and persevere with these remedies until the patient is either relieved or symptoms of collapse approach, such as very small pulse, livid surface, and cold perspiration on the extremities. If such symptoms appear, omit the *Veratrum* and give a few doses of *Camphor*, as directed for the commencement of the disease, and then give *Carbo veg.* alternately with *Arsenicum*, at intervals of half an hour, until either reaction ensues or the patient dies.

External Applications, Diet, &c.—At the commencement of the disease, cover the patient up warm in bed, and apply warm flannels or bottles of hot water, or a warm iron, or brick, to the feet; but if the patient is in the stage of collapse, and the surface is bathed with a profuse cold perspiration, do not apply external heat, as it will only make him uncomfortable, and increase the exhausting perspiration. In this stage, rub the surface, especially the extremities, freely with the dry hand, or a dry warm piece of flannel, or a coarse towel—the bare hand is the best. During the active stage of the disease, nothing but the most simple drinks, such as rice-water, arrow-root, corn-starch, and toast-water, should be allowed, and even such liquids only in small quantities at a time.

When the vomiting and purging cease, the above drinks may be made thicker and more nourishing; and when the appetite seems to demand it, thin puddings of arrow-root, rice, or corn-starch may be allowed, and after a day or two more, toast, cracker and meat. Food in substance, like toast, rice, or meat, should never be given more than three times a day, to a patient while recovering from this or any other disease, as the stomach needs seasons of rest.

INFLAMMATION OF THE BOWELS (PERITONITIS).

There are two forms of inflammation of the bowels; one in which the disease involves the smooth membrane which lines the internal surface of the abdominal walls, and the external surface of the intestines, and sometimes extends to their muscular coat; the other consists of inflammation of the mucous membrane or internal lining of the intestines. The former will be considered in this section, the latter under the head of "Inflammation of the Mucous Membrane of the Bowels, or Small Intestines."

Symptoms.—Either after, or without preceding or accompanying chills, languor, and loss of appetite, the patient is seized with acute or sharp pain in the abdomen, generally in the lower part, sometimes on one side only. It may be circumscribed, or extend over a large portion of the abdomen, according to the extent of the disease. The pain is aggravated by movement, coughing, sneezing, sighing, &c. Pressure causes great distress, and even the weight of the bedclothes often increases the suffering, and the patient lies with his knees drawn up so as to relax the muscles over the parts diseased. The abdomen is hot and hard, and, as the disease advances, distended by gas; the bowels are generally constipated, or soon become so, but sometimes they are regular, and nausea and vomiting are not uncommon; the skin is dry and hot, the pulse rapid, small, and hard. The countenance indicates great distress and depression, the cheeks are pale, the eyes sunken, and the tongue and lips are dry. The frequency of the pulse varies from eighty to one hundred and thirty in a minute.

The disease may be caused by exposure to cold, mechanical injuries, irregularities of diet, the breaking of abscesses, or by the perforation of the intestinal tube from ulceration, and the escape of the contents of the bowels into the abdominal cavity. In one instance of the latter kind, in a child, on examination after death we found that the ulceration and perforation were caused by an accumulation of magnesia which had been administered months before; and I have good reason to think that the use of this drug, and prepared chalk, is not an unfrequent cause of this accident, and thereby of fatal inflammation of the bowels, for an examination in another instance of perforation rendered it quite manifest that it arose from the same cause. When this disease results from perforation of the intestine it almost always terminates fatally; only in rare instances, under the most favorable circumstances, can the patient be expected to recover. Therefore, let every one beware of giving or taking either crude magnesia or prepared chalk.

Peritonitis, or the form of inflammation of the bowels under consideration, when not caused by perforation of the intestine, or the bursting of an abscess, can generally be cured by homœopathic treatment, provided always that the bowels are allowed to remain constipated until the symptoms are entirely relieved. If the disease is attended by a low or malignant form of fever, denoted by an early prostration of the vital powers, cold extremities, small irregular pulse, sordes or crusts on the teeth, and delirium, there is more danger of a fatal termination.

Treatment.—The first and most important point is, to let the bowels alone, and never attempt to obtain a passage even by injections, as the motion of the intestines and of the patient, necessary for an evacuation, is sure to increase the severity of the disease. Wring a large towel from cold water and apply over the abdomen, over that put four or five thicknesses of dry flannel large enough to cover entirely the wet cloth; then pin a dry towel around the body and over the flannel so as to confine the whole to its place. Wet the towel once in six or eight hours. Later in the disease, if the above and proper remedies fail to relieve promptly, cloths wrung from hot water and changed every fifteen minutes or half an hour, or an oil-meal or ground flaxseed poultice, will often do better

Aconite: This is generally the most important remedy in the treatment of this disease, and it should be continued as long as there is much heat of skin, even over the bowels and body. If the attack is severe, give a dose of this remedy every hour until there is some improvement, then lengthen the intervals to three hours. If the pain is very severe or sharp, and the skin hot, and *Aconite* alone does not relieve, once in four hours omit it, and give a dose of *Belladonna* in its stead.

Dose of this, or either of the following remedies, see page 7.

Bryonia: This is a very important remedy as soon as the severity of the febrile symptoms has been somewhat relieved by the use of *Aconite*, or the latter remedy and *Belladonna*—usually required at the end of twenty-four or forty-eight hours. Even earlier it will be found useful; if there is a tendency to a low or malignant form of fever, or if the extremities are cold and the pulse small, give this remedy once in four hours, and *Aconite* every hour between, if fever still continues, but if it has abated, give it alone.

Veratrum: If there is excessive nausea or vomiting, *Veratrum* may be given alternately with *Aconite*, one hour apart, until this symptom is relieved.

Arsenicum: If, notwithstanding the above remedies, alarming symptoms make their appearance, such as cold extremities, small or irregular pulse, great prostration of strength, distended bowels, and if the teeth are covered with crusts of dark dried mucus, and the tongue is dark and dry, give a dose of *Arsenicum* once in two hours.

A formidable and sometimes a malignant form of this disease occasionally occurs in the case of females after child-birth. The remedies already named are often the proper remedies in such cases; but *Arnica* given once in three or four hours during the confinement, will tend to prevent such attacks, and *Aconite*, *Belladonna*, or *Bryonia*, will generally relieve them, if applied early, unless the disease is prevailing as an epidemic, and is of a malignant character. When this is the case, the above remedies may still be useful at the commencement of the disease, but *Rhus tox.* and *Arsenicum* will be required at a later stage, in case the other remedies fail to relieve the symptoms. These may be given alternately, at intervals of two hours.

If in any case there is irritation of the neck of the bladder, with frequent and painful passage of urine, *Cantharides* is the remedy, and an occasional dose may be administered for this symptom; and if it fails to afford relief, give *Apis mel.*

Acute inflammation of the bowels sometimes, instead of being cured, assumes a chronic form, or the inflammation may come on so gradually as not to manifest acute symptoms. For this form of the disease, give *Sulphur* night and morning for a week, then omit and give *Lachesis* in the same manner. These remedies may be continued as long as there is any improvement, when *Arsenicum* may be given night and morning.

Diet.—During an attack of acute inflammation of the bowels, nothing but rice-water, arrow-root, corn-starch, toast-water, or weak gruel should be allowed.

INFLAMMATION OF THE MUCOUS MEMBRANE OF THE SMALL INTESTINES (ENTERITIS).

This disease may be caused by exposure to sudden changes of temperature, but more frequently by excesses in eating or drinking, or by improper articles taken into the stomach. Like inflammation of the stomach, it not unfrequently occurs during the course of febrile diseases, especially during typhoid fever. It may also be caused by a change of water.

Symptoms.—This disease generally begins with uneasiness in the bowels, followed by griping pains, which gradually become more severe, especially about the navel and a few inches below, and at the sides, and there is almost always more or less tenderness on pressure. Diarrhœa usually soon follows, and the stools follow the attacks of griping pain, and consist of watery and natural discharges, mixed with bile, mucus, and undigested food, sometimes tinged with blood; occasionally they are green or clay-colored. Chills and fever either precede, accompany, or soon follow the local symptoms; the pulse is frequent and full, the skin dry, and the tongue somewhat furred. There is generally little or no headache. This disease is often mild and attended with but little pain, but

in other instances the pains are very severe, the bowels very tender and distended, with flatulence, and the discharges offensive. Sometimes the inflammation ascends to the stomach, and vomiting occurs, with great thirst and tenderness of the stomach on pressure. The liver, in some cases, becomes involved, causing yellowness of the skin and eyes. If the disease continues, the tongue becomes red and dry, and the pulse frequent and feeble, and the patient either sinks or slowly recovers.

An acute attack not unfrequently terminates in chronic inflammation, or the disease may be so gradually developed as not to manifest any acute symptoms. Diarrhœa is a general attendant on the chronic form of the disease, and in fact many of our most obstinate cases of diarrhœa are caused by this affection. There may be but two or three passages in twenty-four hours, or they may be very frequent. They are sometimes scanty, but in other instances profuse. The evacuations are similar to those of the acute form of the disease; sometimes portions of false membrane are discharged, and in some instances of a tubular form, resembling portions of the intestine, but lacking the smooth external surface of the latter. In advanced stages of the disease, the evacuations are sometimes mingled with pus or matter.

If there is pain, it is generally partially relieved after the discharges. The abdomen may be distended or very flat, the appetite craving or moderate. The pulse is generally increased in frequency, the tongue slightly furred, and in the advanced stage often smooth and red, and the skin dry and harsh, with more or less rapid diminution of strength and emaciation. The spirits are often depressed, and cases of insanity have sometimes had their origin from chronic inflammation of the mucous membrane of the bowels. Towards the close of fatal cases, hectic fever usually occurs, and the patient becomes much emaciated. The duration of the disease is exceedingly variable, in light cases it may last years.

Treatment.—In acute cases, when there are thirst, hot skin, and full pulse, *Aconite* should be given—a dose every hour, until the febrile symptoms are relieved.

Dose of this or other remedies, see page 7.

Mercurius viv. If, at the commencement of the disease, there