

Treatment.—If the disease has been caused by mechanical injuries or over muscular exertion, give *Arnica* once in two hours. If there is high febrile excitement, give a dose of *Aconite* every hour until it is lessened.

Bryonia, after either *Arnica* or *Aconite*, in acute cases, is generally the most important remedy, especially when there are sharp or dull pains, with soreness which is increased by pressure or movement. Give a dose once in three hours. As soon as the acute symptoms have been relieved, give a dose of *China* once in four hours.

China should generally follow the above remedies, and when the disease occurs in districts where intermittent and remittent fevers prevail, if the symptoms are not very acute, it may be given at the commencement of the disease. Give a dose once in six hours. If there are vomiting, burning, and great debility, give *Arsenicum* once in two hours. In chronic cases, give *China* every night for two weeks, then *Sulphur*, and afterward *Arsenicum*, each for two weeks. Wring a towel from cold water, and apply over the diseased organ, and over that four or five thicknesses of dry flannel; wet the towel once in eight hours.

CHAPTER VI.

DISEASES OF THE URINARY AND GENITAL ORGANS.

INFLAMMATION OF THE KIDNEYS (NEPHRITIS).

THIS disease may be caused by wounds, bruises, exposure to wet and cold, the application of blisters to the skin, the use of certain medicines internally, such as turpentine, Spanish flies, and alcoholic drinks. The presence of gravel or stone in the kidneys, or in the passage to the bladder, may cause this disease. Gouty individuals are very subject to it.

Symptoms.—A sharp and severe, a dull and heavy, or a burning pain, deep in the small of the back on one side, is the most prominent symptom. The pain frequently extends down in the direction of the bladder, groin, scrotum, or even the inside of the thigh. Sudden motions of the body, or heavy pressure over the kidneys, increase the sufferings. There is often a feeling of numbness extending down the thigh, and the testicle is sometimes drawn up and sore. There is generally a frequent inclination to pass urine, and it is high colored, scanty, and perhaps mixed with blood or mucus, and it may deposit a gravelly or earthy matter on standing. Sometimes there is a suppression of urine from the diseased kidney; in that case the urine discharged may be clear, coming entirely from the well kidney. If both kidneys are inflamed, and the urine is entirely suppressed, if relief is not soon obtained, stupor and death follow. Chills followed by fever attend this disease; the fever may be slight or high, and is apt to be remittent. The bowels are generally constipated, and nausea and vomiting are not uncommon, in severe cases. The inflammation may grad-

ually abate and the patient recover, or ulceration or an abscess ensues often within a week or ten days; in that case matter or pus may appear in the urine, and the patient gradually recovers or the disease may become chronic. Sometimes the passage to the bladder may become blocked up by a stone, or from swelling from inflammation, and urine, mucus, and matter or pus, may collect in the pelvis of the kidney or commencement of the passage, and distend the part so as to form a large tumor, which may break into the colon or large intestine, and its contents be discharged by the bowels; or, in rare instances, the contents of the tumor make their way externally through the loins, in the form of an abscess, and are thus discharged. In other cases, the tumor breaks into the abdominal cavity, which causes fatal peritonitis. Inflammation of the kidneys sometimes, although rarely, terminates in gangrene or mortification; this may be suspected when there is a sudden cessation of pain, followed by cold sweat, sinking of the vital powers and death.

Chronic inflammation of the kidneys sometimes follows an acute attack, in other cases it comes on gradually, with but little pain, scanty, but frequent passages of urine, which is high-colored, and deposits an earthy sediment on cooling. If the disease continues, mucus and pus, or matter, generally appear in the urine, and if the disease is not arrested, the patient is worn out by hectic fever, night sweats, and gradual emaciation. Chronic inflammation of the kidneys is very apt to be confounded with inflammation of the bladder, which gives rise to similar mucous and purulent discharges with the urine; but on careful inquiry, you will find that the patient feels more or less pain and uneasiness in the kidneys, and that on heavy pressure there is some tenderness. We sometimes have a neuralgic affection of the kidneys, in which the pain is very severe, but it occurs in paroxysms, and is without fever.

Treatment.—In all cases which are attended with chills and fever, give a dose of *Aconite* every hour. If, at the end of twelve hours, the symptoms are not relieved, give *Cannabis* alternately with it, at intervals of one hour. If, at the end of twenty-four hours more, there is an abatement of the symptoms, continue the above remedies, but at intervals of two or three hours; but if no

improvement follows, omit the *Cannabis*, and give *Cantharis* alternately with *Aconite*, at the same intervals. If there are severe shooting pains extending from the kidneys toward the bladder, and there is heat, with feelings of distention in the kidneys, with a scanty discharge of orange-yellow urine, omit the *Cannabis* or *Cantharis*, for twelve, out of every twenty-four hours, and give *Belladonna* alternately with *Aconite*. *Belladonna* is also useful for neuralgia of the kidneys.

Dose, see page 7.

As soon as the acute symptoms have been relieved by the above treatment, *Nux vom.* often becomes a valuable remedy, especially for gouty subjects, and the intemperate; also for those subject to gravel or piles. Give a dose once in two hours. This remedy is also useful for neuralgia of the kidneys. *Pulsatilla* may be given in the case of females, instead of *Nux vom.*, especially if there is a suppression of the menses.

If the disease has been caused by mechanical injuries, give *Arnica*, alternately with *Aconite*. If the disease has been caused by a blister, or by *Cantharides* or *Spanish flies*, give either six globules or drop doses of *Camphor* every hour.

For chronic inflammation of the kidneys, several of the above remedies will be found useful, but others will often be required. If at the end of five or six days, in acute cases, the patient feels chilly at times and the pain becomes throbbing, or if matter appears in the urine, omit *Aconite* and give *Hepar sulph.* once in six hours. Either *Cannabis* or *Nux vom.* may be given alternately with it, if pain and soreness linger, or if there is a frequent inclination to void urine with pain or burning.

Lycopodium: Give this remedy in chronic cases, when there is a red or yellow sediment in the urine, with or without pus or matter. Give a dose night and morning, and if it fails to relieve, give *Phosphorus*, especially if, with or without a reddish sediment, there is whitish matter or mucus in the urine.

Give *Calcarea carb.* when the urine is offensive, dark brown, or there is a whitish or light-colored earthy sediment. Give a dose night and morning. If while giving either of the last three remedies there is much pain in the kidneys, or irritation in voiding

urine, you can give a dose of either *Cannabis*, *Pulsatilla*, or *Nux vom.* occasionally between the doses of the other remedy. If the above remedies fail in chronic cases, drop one drop of *Spirits of turpentine* on to some powdered sugar, rub it up well, and make ten doses of it, and give one once in six hours.

Diet, &c.—In all acute cases, the diet should be light, and *Sleepy-elm tea*, or *Gum-arabic water* may be used as a drink.

BRIGHT'S DISEASE OF THE KIDNEYS.

(GRANULAR OR FATTY DEGENERATION OF THE KIDNEYS.)

This is a somewhat rare disease, and in the acute form, the symptoms resemble those of acute inflammation of the kidneys, but it is distinguished from the latter affection by the urine containing albumen, or a substance similar to the white of an egg; and often by the occurrence within a few days of symptoms of acute dropsy. To detect albumen in the urine, if it is cloudy or muddy, strain it, then heat it in a silver spoon, earthen dish, or tin cup, to the boiling point, then if there is no change in its appearance, drop in a few drops of vinegar and heat it again. If the urine contains albumen when it is thus treated, there will soon appear white curdy flakes, if the quantity is considerable, but if it is small, there will merely be a whitish cloudiness.

The chronic form of this disease is much more common than the acute. The symptoms are often very obscure at their commencement. A growing weakness, some derangement of the digestive organs, an occasional tendency to frequent passages of urine, with diminution of the quantity discharged, or some irregularity in its appearance, with perhaps obscure pains in the small of the back, are usually among the first symptoms noticed; and even these may escape notice, or at least may not cause the patient to apply to a physician until dropsical swellings appear, which usually commence in the face and extend over the whole body. There may be some tenderness over the region of the kidneys on strong pressure, and the quantity of urine discharged is found to be less than during health, and its density or weight is also diminished, and it usually

contains more or less albumen. As the disease progresses the blood gradually loses its coloring matter, and the patient becomes very pale. The albumen although generally present in the urine, is not always constantly so, but its specific gravity, or weight, in equal quantity compared with healthy urine, gradually diminishes, and the countenance of the patient, from the loss of the red globules of the blood, often acquires, before death, a waxen yellowish white death-like hue. Dropsy generally attends this disease, but it is not always present; nor is the presence of albumen in the urine always positive evidence of the existence of this affection; but when the urine is scanty and contains more or less albumen, although perhaps free from it at times, and when at the same time the specific gravity or weight of the urine is steadily diminishing, until it is considerably less than during health, you may be reasonably sure that the patient is suffering from this disease; and the occurrence of dropsy and a pale and bloodless countenance, will strengthen this opinion. Disease of the heart, especially enlargement of the heart, and also disease of the liver, are frequent complications of this affection, and patients suffering from this disease are very subject to inflammatory diseases.

Treatment.—The treatment in both the acute and chronic form of the disease is very similar to that recommended in inflammation of the kidneys. In acute cases *Aconite*, *Cannabis*, and *Cantharis* may be given as there directed; *Belladonna* will not be required. In chronic cases the last two remedies will often be useful, also *Lycopodium*, *Calcarea carb.* and especially *Spirits of turpentine*. If symptoms of dropsy occur in either case give *Apis mel.* once in four hours, and if within a few days there is no improvement, alternate it with *Arsenicum* at intervals of four hours.

DIABETES.

(EXCESSIVE SECRETION OF URINE.)

This disease is characterized by copious discharges of sweet urine of a pale yellowish or greenish yellow color, and sometimes of a faint sweetish odor. The saccharine matter resembles grape

sugar. The first symptom which usually attracts the attention of the patient is the frequency of the calls to pass urine, and he generally soon notices that the quantity is increased, and sometimes he accidentally discovers that it is sweetish to the taste. The patient soon begins to be troubled with great thirst, the appetite often becomes craving, the mouth and throat dry and parched. There is a sensation of hollowness or sinking, with faintness at the pit of the stomach, and other dyspeptic symptoms with great debility and emaciation. The quantity of urine discharged usually varies from ten to twenty, and sometimes from thirty to fifty pints or more in twenty-four hours, and this often for weeks or months together. The specific gravity or weight of the urine is generally increased owing to the presence of sugar. If sugar is present in any quantity you can detect it very readily short of tasting. Add a little yeast to some of the urine and set it down in a warm place, and if there is sugar present it will begin to ferment within twenty-four hours, whereas healthy urine will not go through the same process. Albumen is also sometimes present. This disease is very slow in its progress, sometimes lasting for many years, and in many cases patients die of some other affection, such as consumption, disease of the brain, liver, or stomach. Occasionally they die early in the disease from exhaustion occasioned by the profuse secretion.

We sometimes have a profuse flow of urine without the presence of sugar, caused by various nervous affections, especially hysteria, but this form of the disease is not usually serious.

The cause of sugar being found in the urine in diabetes has been long a question with medical writers. Some have supposed that the stomach and bowels are chiefly in fault, others that the liver secretes an excessive quantity in this disease, and some of the latest writers attribute it to deficient action of the lungs, in that the sugar which is formed in the blood which comes from the liver on its arrival in the lungs fails to be decomposed by the oxygen of the air, and to disappear as in health, but passes in the general circulation to the kidneys, and is there separated from the blood.

Treatment.—General measures are perhaps more important

than medicine, although the latter may be of great service. As to diet it is necessary that it should be nutritious, but that it should contain neither sugar nor starch, therefore potatoes and fine flour in every form should be omitted. Give bran or canel bread with butter, beef or mutton, fowls and eggs, also cabbage and turnips. Let the patient drink moderately at a time, but in all about enough to relieve his thirst. Let him spend his time in the open air in taking active exercise, and follow the directions as to particular exercises contained in the section on consumption.

Carbo veg.: Give a dose of this remedy night and morning for two weeks; then continue it if there is any improvement, and as long as the patient continues to mend. After the above remedy has ceased to act, give *Mercurius viv.* night and morning, and continue it as long as there is any improvement. *Veratrum* can follow the above if it is needed, also *Natrum mur.*

GRAVEL—STONE—SPASMS OF THE URETER.

A fine, gravelly or gritty matter is sometimes discharged with the urine, causing much pain and irritation, and earthy concretions not unfrequently form in the kidneys, from the urine, and pass to the bladder, and are either discharged with the urine, or remain and form a nucleus around which more earthy matter collects, and forms what is denominated stone in the bladder. It sometimes happens that before the gravel-stone leaves the kidney, it becomes too large to pass readily through the ureter, or passage from the kidney to the bladder, and if it happens to be rough, as it often is, its passage causes great irritation and the most terrible spasmodic pains to which the human frame is subject. The attack usually commences suddenly during comparative health. A severe pain is felt in the region of the kidney, shooting to the groin, testicle, or thigh, and extending especially obliquely down the abdomen from the kidney to the bladder, in the direction of the passage. Sometimes the pain is felt chiefly about the hip. The pain occurs in severe paroxysms, and is often accompanied by nausea and vomiting, and sometimes by a small and feeble pulse, cold,

pale surface, and profuse sweat. A frequent inclination to pass urine is another symptom which is usually present. The patient frequently changes his position without obtaining the relief which he covets. At length the stone escapes into the bladder, and the patient obtains relief immediately. Not unfrequently the symptoms return after a time, upon the entrance of another stone into the ureter, and a similar train of symptoms ensues. Occasionally the spasms may abate for a considerable time, without the escape of the stone, and return again. It is well to keep watch of the urine for the stone, as it is all-important that it pass the urethra as soon as possible after it enters the bladder, or it may become a nucleus for stone. If it does not pass, let the patient drink freely of *Slippery-elm tea* or *Gum-arabic water*, and retain the urine until the bladder is distended, and then pass it in a full stream while standing up, with the legs separated, and the body leaning forward; by so doing, it will sometimes pass. Stone in the bladder causes a frequent desire to pass urine, attended with severe pain toward the last that is passed, itching of the end of the penis, and sudden stoppage of urine while passing it, by the stone blocking up the passage.

Treatment.—In all cases where you notice a gravelly, gritty, or earthy sediment in the urine, medicine should be given so as to counteract this tendency, and thereby prevent the formation of gravel or stone in the kidney or bladder. If the sediment in the urine is red or yellowish, give *Lycopodium* every night. If it is light colored, give *Calcarea carb.* every night. If any derangement of the digestive organs occurs during the treatment, give *Nux vom.* before every meal; if it fails to relieve, give *Pulsatilla* in the same manner.

The above, together with *Cantharis* and *Cannabis*, are among the most important remedies for the irritation caused by either stone in the bladder, or in the pelvis of the kidney, before it engages in the ureter or passage to the bladder.

For spasms of the ureter, or the severe paroxysms of pain described above, caused by the passage of stone or gravel from the kidneys to the bladder, give *Belladonna* every half hour, and if, after giving four doses, no relief follows, give *Nux vom.* in the

same way. Put the patient into a warm-bath if convenient; if not, wring a sheet from warm water, and wrap it around the body from below the arms to the hips, and put over the sheet, dry flannel; wet the sheet often. If the above measures afford no relief, and you cannot obtain the services of a homœopathic physician, if the patient is an adult, and the pains are very severe, give either twenty-five drops of *Laudanum*, or one sixth of a grain of *Morphine*, and if at the end of one hour, there is no relief, repeat the same dose; even a third dose may be given at the end of two hours more, if necessary. The cause of the suffering is a mechanical injury, which is being done by a rough stone passing through a small delicate passage, mechanically distending it, and tearing its delicate structures, and causing spasmodic contractions. Homœopathic remedies may sometimes, but according to my experience, not often, relieve the latter; or the stone may soon pass, and relief follow. If they fail, there is no serious objection to the use of the anodyne, as all we want is palliative relief, until the stone passes.

INFLAMMATION OF THE BLADDER (CYSTITIS).

The affection denominated strangury or dysuria, or painful urination, is but one form of this disease, and consists of inflammation of the mucous membrane, which is not of sufficient severity or extent to cause general febrile symptoms. There is a frequent desire to pass urine, with burning, cutting pains along the neck of the bladder, in the course of the passage, and at the end of the penis, similar to what we have in severer cases of cystitis. The causes are similar to those which cause the severer forms of the disease, and the treatment is similar.

Inflammation of the bladder may be caused by mechanical injuries, the introduction of instruments, stone in the bladder, over-distention from retained urine, severe labor, sexual excesses, exposure to cold while perspiring, sudden drying up of old ulcers, or other habitual discharges; the extension of inflammation to the bladder, in cases of gonorrhœa, dysentery, inflammation of the

womb or bowels; also the application of blisters, and the internal use of *Cantharides*, *Spirits of turpentine*, or some other substance which acts specifically on the bladder. Gouty, rheumatic, and intemperate subjects, are very liable to this disease.

Symptoms.—Chills, followed by fever; more or less severe pain, frequently with a burning sensation in the region of the bladder, which often extends to the end of the penis in the male, and the external orifice of the urethra or urinary passage, in the female, and sometimes to the anus or passage from the bowels, and upper parts of the thighs, loins, and abdomen. The pain in the region of the bladder is generally increased by pressure on the lowest part of the abdomen; there is, in most cases, a frequent inclination to pass urine, which passes in small quantities, sometimes drop by drop, with much straining; but in some instances the urine is retained, and produces a feeling of distention and fullness in the region of the bladder. In some cases, nausea, vomiting, and distention of the abdomen, occur. The frequent and ineffectual efforts to urinate, cause great restlessness and anxiety. If the severe symptoms are not relieved within a few days, the patient begins to sink; the pulse becomes small, frequent, and irregular, the tongue dry with great thirst; the extremities cold, the bowels distended with gas; perhaps hiccough, or delirium, followed by stupor or convulsions, and the patient dies the latter part of the first, or during the second week. Death sometimes results from mortification, in which case the pain abates suddenly, sometime before this event. If the patient gets well, the symptoms gradually subside; sometimes there is a copious discharge of mucus in the urine, as the disease abates; in other instances pus or matter is discharged, which may come from an abscess in the walls of the bladder, or from ulceration of the mucous membrane. Abscesses may break into the lower bowel or vagina. At the commencement of the disease, the urine is often but little altered, perhaps rather scanty and high-colored, but as the case progresses, it becomes cloudy, or thick, from the presence of mucus or matter; sometimes bloody at any period of the disease, and sometimes offensive at a late stage. When there is great pain and tenderness at the lower part of the abdomen, and the effort to pass urine is very painful, or impos-

sible, so as to give rise to retention of the urine, while there is little inclination to strain, the probability is that the external surface, or the muscular coat of the bladder, is chiefly affected. But when there is little or no pain in the lower part of the abdomen, but a frequent inclination to void urine, with burning and straining, we have reason to suppose the disease is principally confined to the mucous membrane or inner surface, perhaps in a great measure to the neck of the bladder.

Chronic inflammation of the bladder frequently results from the acute form of the disease, in other instances it comes on gradually, with symptoms similar to those of the acute disease, only less severe. There is a frequent inclination to pass urine, sometimes with burning or shooting pains and straining, and even spasms of the bladder. The urine contains mucus, and sometimes pus, which gives it a whitish, yellowish, or greenish appearance. The quantity of mucus is sometimes very large, and it may be so thick as to be passed with difficulty, and so irritating as to cause burning pain in the passage. Occasionally blood appears in the urine. After a time, if the disease continues, all the symptoms are aggravated, and pus or matter, in a great measure, takes the place of the mucus, and the patient is gradually worn out by the discharge, and hectic fever.

Treatment of Acute Inflammation of the Bladder.—If the disease is attended with severe symptoms of strangury, with constant inclination to pass urine with scalding, the patient may be allowed to drink freely of *Slippery-elm tea* or *Gum-arabic water*, for these drinks tend to increase the quantity of urine, and render it less acrid, and are therefore useful. But if there are pain, soreness, and a feeling of distention in the lowest part of the abdomen, and the contraction of the bladder causes great pain, when an attempt is made to pass urine, and there is neither straining to pass, nor scalding during its passage, the disease is doubtless in the muscular and external coats, and the less the patient drinks the better, as there is liable to be retention of urine in such cases; and even if there is not, the frequent contraction of the bladder to expel it, only increases the suffering.

If the disease has been caused by a blister, or by *Cantharides*

given internally, give either six globules saturated with *Camphor* or one drop of the tincture of *Camphor*, every half hour until the symptoms are relieved.

Aconite: In all cases attended with fever, pain in the region of the bladder, with or without burning, scalding, and straining while passing urine, give this remedy every hour. Even if there is not much fever it will often be useful, given alternately with one of the following remedies, at intervals of one hour, especially with *Cannabis*.

Dose of these remedies, see page 7.

Cannabis should either follow *Aconite* or after a few doses of *Aconite* have been given, it should be given alternately with it, when there is mucus or blood discharged, and when there is a constant desire to pass urine, and its passage is accompanied by straining or burning; also, when there is suppression or retention of urine.

Cantharis: Give this remedy once in two hours if *Cannabis* fails to relieve the symptoms at the end of twenty-four hours, especially if there is ineffectual urging to urinate, stinging, cutting, or burning pains in the region of the bladder, and if the lower part of the abdomen is distended and tender to the touch or on pressure.

Nux vomica may be given after the fever and acute symptoms have been somewhat relieved by the above remedies, especially if there is a frequent inclination attended with violent straining to urinate, pain during and after the passage, burning pain and scanty urine. This remedy is especially useful in the case of intemperate or gouty subjects, and for those subject to piles.

Pulsatilla: Give this remedy after the acute symptoms have been somewhat relieved by other remedies, when there is a frequent discharge of bloody or slimy urine, with straining and aching or cutting pains in the region of the bladder. *Pulsatilla* is especially useful during pregnancy, and in the case of females generally, also for gouty subjects.

In case the disease is simple strangury and not attended with chills or fever, *Pulsatilla* or *Nux vomica* may be given at the commencement, but even such cases are often benefited by *Aconite*,

Cannabis, or *Cantharis*, and especially by *Camphor*. Let the diet be light, avoid all acids, and apply cloths wrung from warm water over the lower part of the abdomen, hips, and between the thighs.

Treatment of Chronic Inflammation of the Bladder.—The remedies already named, especially *Pulsatilla*, *Cannabis*, and *Nux vomica*, are often useful. Select one of these remedies and give before every meal, about half an hour before eating, and give a dose of *Sulphur* at bedtime; and continue these remedies as long as there is any improvement. Then give another remedy before meals, and *Calcarea carb* at bedtime. *Dulcamara* and *Lycopodium* are sometimes useful in chronic cases. If all remedies fail you can try one tenth of a drop of *Spirits of turpentine* two or three times a day; drop one drop on some pulverized sugar, mix it well and divide into ten powders.

If during the continuance of inflammation of the bladder, either acute or chronic, there is retention of urine, and the bladder becomes distended, give the patient a warm bath, or at least wring a sheet from warm water and wrap around the hips, thighs, and abdomen; give an injection of warm water into the bowels, give *Belladonna* internally, and if these measures fail to relieve which will rarely be the case send for a physician, even an allopathic physician if you cannot get a homeopathist, for it may be necessary to use a catheter.

RETENTION OF URINE,

OR INABILITY TO PASS WATER.

When the urine is retained, the bladder becomes over-distended, and pressing upon it causes the peculiar disagreeable pain which arises from pressing upon a distended bladder. Sometimes the bladder can be felt in the lower part of the abdomen, and percussion or striking with the ends of the fingers over it yields a dull sound. There are various causes of retention of urine. It may depend upon obstruction caused by the swelling which results from inflammation of the neck of the bladder, and in this case we have

symptoms of an inflamed bladder added to those of retention. In old men it may arise from inflammation or enlargement of the prostrate gland—which in the male, surrounds the passage as it leaves the bladder. It may arise from the pressure of tumors, or of the womb during pregnancy, on the neck of the bladder; and strictures sometimes cause retention. A spasmodic contraction of the urethra or passage, especially in hysterical persons, sometimes causes this affection. Retention of urine may result from voluntarily restraining its flow until the bladder becomes over-distended, which causes paralysis of the organ. In diseases of the brain or spinal cord in low forms of fever, and even during old age, we may have retention from diminished innervation, or from the muscles losing their power of contracting for the want of due nervous energy. In such cases the retention is generally not complete; when the bladder is distended to a certain degree the patient passes a small quantity of urine voluntarily, but does not empty the bladder; if he has no control over it, and the bladder becomes distended, small discharges frequently take place from time to time; therefore we may have both retention and involuntary discharge of urine at the same time. We may have a similar state, that is, small discharges and retention, from inflammation of the bladder. Retention of urine if not relieved ends in rupture of the bladder and death, or of the urethra or passage, and its escape into the cellular structure in the neighborhood, when it causes sloughing and often death.

Treatment.—If the disease seems to be caused by inflammation, which may be suspected when there are pain and soreness in the region of the bladder with chills and fever, also when there is pain and scalding during the passage of small quantities of urine, consult the section on inflammation of the bladder. But if it is caused by paralysis of the bladder, as frequently happens during the continuance of low fevers, inflammation of the brain or spinal cord, and during old age, give *Hyoscyamus* once in three or four hours, and if it fails to relieve, give *Dulcamara* in the same manner. *Arsenicum* in obstinate cases will be found useful. *Belladonna* may be given when the brain or spinal cord is diseased: also give injections of warm water into the bowels.

When the retention is caused by a spasmodic contraction of the passage in nervous or hysterical patients, give a dose of *Pulsatilla* every hour, and if at the end of three or four hours there is no relief, give *Opium* every half hour for three hours, afterward give *Nux vom.* To overcome a disposition to this form of the disease, give *Pulsatilla* one night and *Nux vom.* the next. In cases of spasmodic retention, a warm bath, or simply a warm hip-bath, and injections of warm water into the bowels, will often relieve the retention for the time being.

If the retention occurs during pregnancy, give *Pulsatilla*, and if it fails, give *Nux vom.*, and let the patient try to pass her urine lying down on her back or side; or while on her hands and knees, and even with her hips higher than her shoulders if necessary.

If the retention is caused by inflammation and enlargement of the prostate gland, give *Aconite* alternately with *Pulsatilla* one hour apart; and a warm hip-bath for present relief. To cure the disease, give *Pulsatilla* at night and *Sulphur* in the morning.

If stricture is the cause of the retention, it must be dilated by bougies, if *Pulsatilla* at night and *Sulphur* in the morning do not relieve it. *Mercurius* and *Dulcamara* are also sometimes useful in such cases.

In no case should a patient be allowed to go longer than twenty-four hours without a passage of urine, and if he takes much drink or fluids, and perspires but little, twelve or eighteen hours is as long as it is safe to allow him to go without drawing off his urine by the means of a catheter. Any physician can perform this operation.

SUPPRESSION OF URINE (ISCHURIA RENALIS).

In this disease urine is not secreted at all; or if any is secreted only a few drops. Suppression of urine may result from inflammation of the kidneys, and perhaps from paralysis of these organs, and various other causes not well understood. It sometimes occurs when the patient is otherwise in comparatively good health,