



A Dictionary of
PRACTICAL MATERIA MEDICA

VOL-I

John Henry Clarke, M.D.

**A
DICTIONARY
OF
PRACTICAL
MATERIA MEDICA**

By
JOHN HENRY CLARKE, M.D.

NEW ISSUE, WITH ADDITIONS

IN THREE VOLUMES

VOL-I



B. JAIN PUBLISHERS (P) LTD

USA—EUROPE—INDIA

PREFACE TO NEW ISSUE

A QUARTER of a century in use is a very fair test for any practical work, and this the *Dictionary of Practical Materia Medica* has stood so well that the publishers have decided to issue it in a form and at a price which should put it within the reach of all practitioners and students of Homœopathy. The steady demand for the work has more than covered the original outlay, so that I am glad to be able to enter into the publishers' plans.

The body of the work stands unaltered and unchallenged. When the work first appeared I was not a little apprehensive that of all the thousands of references and quotations I had made some would have been questioned by their originators. To my surprise, not one objection has reached me, so that I conclude that no one has been misrepresented. A few errors, most of them of minor consequence, have been discovered by myself, and a list of these I am now able to append.

This new issue also gives me an opportunity of including some remedies which have come to the front since the first edition appeared, and these will be found described in an Appendix at the end of Vol. III. Chief among these is *Radium bromatum*, whose full-length portrait now appears in the Homœopathic Materia Medica for the first time.

I suggest to the possessors of the CLINICAL REPERTORY that they should write in its several compartments the items of the new remedies now given.

J. H. C.

PREFACE

IN the preface to the fourth edition of my *Prescriber*, which appeared in 1893, I mentioned that I was then engaged in writing a "Materia Medica," and I stated that it was to take the form of a *Materia Medica Companion to the Prescriber*. Such, indeed, was the original idea with which I started the work, soon after the first edition of the *Prescriber* was published in 1885. But as the materials accumulated, the scope of the work developed beyond the original intention, and it became apparent that to produce anything short of a complete Materia Medica would only be to add to the number of condensed and abridged Materia Medicas, of which there is already a sufficiency of excellent examples. I therefore determined to include in the new work all the remedies of which definite use had been recorded in homœopathic literature. If some are inclined to object that I have inserted too many, I reply that my work is a *Dictionary*, and I have never yet found a dictionary that explained too many words. Under the name of each remedy will be found all practical information regarding that remedy that I have been able to bring together, so arranged that every part of it is at once accessible, the information about one remedy in no way interfering with the information about any other. In Farrington's classical work, *A Clinical Materia Medica*, to which I am very deeply indebted, the matter is so arranged that in order to find all the author has to tell about a single remedy, search must be made under a large number of different headings; in the case of Ipecacuanha, for example, twelve other remedies must be consulted. The plan on which the *Dictionary* is based obviates this result.

NAME OF THE WORK.

I have named this work a Dictionary of "Materia Medica" because no other name would have been intelligible. But the name, nevertheless, in homœopathy, is somewhat of a misnomer. We are dealing with forces which, though derived from materials, are anything but "material" in the common acceptation of the word. Our agents are forces of a higher order than any known to Old Physic, and it is important that homœopaths should know them as such. Homœopathy is from first to last an art of individualising. We have to individualise patients, and individualise remedies. However convenient it is to think of remedies in

connection with the diseases in the treatment of which they are most frequently called for, it must never be forgotten that this is a convenience and nothing more. To allow our conception of our remedies to be limited by any list of nosological terms is to accept again the mental fetters of old-school therapeutics. To understand and utilise our remedies to the fullest extent, we must know them as powers ready to serve us in any case, no matter what the name of the disease may be, when the indications for them come to the front. And we must be prepared to find these powers hidden in common articles of food and drink, which we are constantly taking into our bodies in large quantities with complete impunity; and even in the tissues and secretions, morbid and healthy, of our bodies themselves. My object in the *Dictionary* has been to so present the picture of each remedy that it may be at once recognised and distinguished from any other by those who consult its pages. In doing this I have considered first those points which seem to me to have a *practical* bearing; points which have seemed of academic interest only I have left in the main to other works.

THE SCHEMA.

The body of every homœopathic *Materia Medica* must consist of a *Schematised list of the Symptoms* belonging to each remedy. This is known, in brief, as "The Schema." In the *Dictionary* it comprises all that portion given under the heading, SYMPTOMS.

Abridged *Materia Medicas* and lists of keynote, though of very great value, cannot take the place of a full Schema. The prescriber is constantly requiring to know the exact symptoms produced or cured by a drug, and very often these are not to be found among the recognised keynotes. Again, when a prescriber has found his correspondence in some leading symptom, he may wish to test the correspondence in other particulars. For these purposes nothing short of a detailed list of symptoms in each section of the Schema is of any service. My work in no way lessens the value of the abridged works; on the contrary, it very greatly enhances it, by providing the necessary complement to their usefulness.

The Schema arrangement adopted by Hahnemann was a necessary evolution of his method. Day-to-day records of provings, though of much interest, are of little use in practice, from the impossibility of finding individual symptoms in them. The Schema adopted by me is arranged under 27 numbered headings: 1, Mind; 2, Head (including sensorium and scalp); 3, Eyes; 4, Ears; 5, Nose; 6, Face; 7, Teeth; 8, Mouth; 9, Throat; 10, Appetite; 11, Stomach; 12, Abdomen; 13, Stool and Anus; 14, Urinary Organs; 15, Male Sexual Organs; 16, Female Sexual Organs; 17, Respiratory Organs; 18, Chest; 19, Heart; 20, Neck and Back; 21, Limbs (in general); 22, Upper Limbs; 23, Lower Limbs; 24, Generalities; 25, Skin; 26, Sleep; 27, Fever. The sources from which the Schema is compiled are mainly, Timothy, Field Allen's *Encyclopædia of Pure Materia Medica*, and Constantine Hering's *Guiding Symptoms*. Without these two monumental works my work would have been scarcely

possible. Allen includes all the symptoms of Hahnemann's *Materia Medica Pura* and *Chronic Diseases*, with all the later provings up to the date of his work's completion (1879). Hering's *Guiding Symptoms* includes, in addition to the chief symptoms of the older works, many clinical additions and glosses. Hale's *New Remedies*, 2nd and 5th editions, have rendered me services scarcely less important. In my Schema I have sometimes indicated when symptoms are of clinical origin but not always, as the distinction is more academical than practical. I have also sometimes inserted in the Schema names of diseases. These will be taken as clinical suggestions depending for their value on the appropriateness of the remedy in other respects.

CLINICAL SYMPTOMS.

In regard to the inclusion of *Clinical Symptoms* without always distinguishing them, my reasons are these: I know that symptoms removed by a remedy in a patient who is taking it are an indication of the remedy's power, even though the remedy may not have produced those symptoms in a prover. I know that many of the best indications we possess for different remedies were found out during the provings by the disappearance of symptoms from which the provers themselves were at the time suffering. I know that a remedy when being taken by a patient will often produce some new symptoms of its own whilst removing the others. I know that these new symptoms are available for practice; and what is more than this, I know that the practitioner who cannot recognise drug symptoms in his patients loses the best materia medica teacher he is ever likely to find, and will spoil many of his cases by supposing them worse when they are really doing well on the right medicine and only require to have the medicine suspended or partially antidoted. Those who have scruples about prescribing on clinically observed symptoms have the *Cyclopedia of Drug Pathogenesis* at their disposal. It is a work which has rendered me excellent service in compiling much of my *Dictionary*; but it seems to me to need digesting and schematising if it is to be of much use in daily practice. Those again, who like to know the authority for every symptom, have Allen's *Encyclopedia* to supply their want so far as the vast bulk of the materia medica is concerned. In the case of the less well known remedies, I have named the authorities; in regard to the old-established remedies, I take for granted that the authorities for these are known.

AUTHORITIES.

In addition to the works of Allen and Hering and the *Cyclopedia of Drug Pathogenesis*, Dr. Curie's edition of Jahr's *Materia Medica*, the *Materia Medicas* of Lippe and Guernsey, Cowperthwaite's well-known *Text-Book*, and many others have been consulted. But the account of many of the remedies in the *Dictionary* has been compiled from sources inaccessible to the general reader, being scattered up and down the periodical literature of Homœopathy, and throughout the writings of original workers, among whom I may name Dr. Comp-

ton Burnett and Dr. Robert T. Cooper as pre-eminent, each in a line of his own. Throughout the *Dictionary* will be found accredited to these authorities many guiding symptoms of their observation, some already recorded in their published works, very many communicated to me in private conversations, and verified by myself in practice. And I am no less indebted to Dr. Thomas Skinner for generous help in materia medica studies. Years ago when I was making a special investigation into the action of the high attenuations, Dr. Skinner gave me the greatest possible assistance. We went over a large part of the materia medica together, and the notes I then made have been of great service in compiling this work, especially the introductory sections.

THE INTRODUCTORY SECTIONS.

Whilst the Schema is the essential feature of the materia medica, it is of great assistance in the understanding and using of it, to have, in addition, some introductory guide. This I have supplied in each instance, and the combination of the two is one of the main objects of this work. Hitherto narrative accounts of remedies have been provided independently in works like Dr. Hughes's classic *Pharmacodynamics*; and through no fault of their authors, practitioners have endeavoured to make these works do service for a complete materia medica, dispensing with the use of both schema and repertory. I think my method will obviate this risk.

NAMES AND PREPARATIONS OF THE REMEDIES.

Under the name of each remedy I have given the synonyms, mentioned its place in nature and the preparations of it that have been used. In regard to the last, I wish it to be understood that I give the actual preparations used in the experiments or in practice. I offer no opinion as to whether these may be the best or not. Some contend that acetic acid is a better solvent of the native alkaloids of plants than is alcohol. When acetic preparations have been used I have mentioned the fact. Dr. Cooper has used fresh-plant tinctures, made from young shoots, with other actively growing parts of plants, in the case of remedies of which the usual preparations are made from roots or dried specimens; and he maintains that in such cases the fresh-plant tinctures are superior. The same may be said of animal preparations. I have used a preparation of *Sepia* made from the fresh ink-bag, given me by Dr. R. Swallow, of Ningpo, and I can confirm his opinion that it is a better preparation than that made from the ordinary dried ink.

"CLINICAL."

Next, under the head CLINICAL, I have given an alphabetical list of the diseases in relation to which the remedy has manifested, or seems likely to manifest, some curative power. This list is of no independent authority, many of the items being merely suggestions of my own. It is not to be regarded either as inclusive or exclusive,

but rather as suggestive. But the list serves further purposes ; and first, it enables me to save space. If I were to describe the sphere of a remedy in each of the diseases in which it has been used, I should be obliged to repeat the same indications many times over in slightly varied form. The main indications of a remedy are the same in any disease, and the fine indications will be found on referring to the headings under which they occur in the Schema. Further, the list enables me to relate the *Dictionary* to the *Prescriber*. A number of the names of diseases in the list will be found printed in italics. This does not mean that the medicine is more indicated in these diseases than in the others ; it is merely to indicate that under that particular heading the drug will be found mentioned in the *Prescriber*, and that there its special indications are given and compared with those of other remedies. For example, under ATROPINUM is the following list : "Blepharospasm.* Convulsions. Enuresis. Epilepsy. Eyes, affections of. *Gastric ulcer*. Locomotor ataxy. Mania. Neuralgia. *Pancreatitis*. Spinal irritation. Tetanus. Vision, disorders of." On referring to the *Prescriber*, under GASTRIC ULCER and PANCREATITIS, Atropinum will be found mentioned along with other remedies. Finally, the lists will afford a convenient basis for compiling a clinical index.

"CHARACTERISTICS."

Following the heading CLINICAL, comes one which I have named CHARACTERISTICS. Under this I have endeavoured to bring together the leading individual features of each remedy, sketching its outlines with as firm a hand as I can command. It is not a bare list of keynote symptoms, although it includes all of these that are known to me. But it is written in a more or less connected, narrative form, so that it will not have the effect of a catalogue on the reader's mind. This part will contain an account of the leading *Conditions* of aggravation and amelioration which characterise the remedy ;—an essential portion of a practical knowledge and understanding of homœopathic remedies. In indicating these I have made use of the signs "<" (aggravation) and ">" (amelioration), for the double reason that they readily catch the eye, and, at the same time, save space. These and other signs and abbreviations are explained more fully on p. xi. This section, more especially, I intend to supply a kind of introduction and guide to the Schema.

"RELATIONS."

Following this section is another headed RELATIONS. Under this will be found an account of the chief allies of each remedy. The older homœopaths appreciated the value of this knowledge much more than do the moderns ; and a very great assistance it often is in prescribing. When a remedy (*e.g.*, Belladonna) has done all that it can in a case, it is of very great use to know of a remedy (*e.g.*, Mercurius) that is likely to follow out and complete its action, where both are related to the case. When this relationship is very

close the two related remedies are said to be *complementary* to one another, as is the case with Iodine and Lycopodium. On the other hand some remedies have a very injurious effect on each other's action when one is given immediately after the other. I have known a chronic case which was doing well on Calcarea, irretrievably spoiled by a prescription of Bryonia immediately following. Further, it is necessary to know the antidotal relations of remedies in order to be able to control the over-action of any remedy administered. I once experienced very disagreeable symptoms from a dose of Natrum mur. in potency, and suffered for some days before I realised the cause. As soon as I did, I looked up Jahr, and found that smelling Sweet Nitre was one of the antidotes. I put it to the test, and the magical way in which the symptoms were wiped out was a revelation to me of the importance of this branch of homœopathic knowledge. In this section I have also pointed out many of the characteristic differences distinguishing between medicines that have symptoms in common.

“CAUSATION.”

Under the further heading CAUSATION I have mentioned (when such relation is known to exist), the conditions to the effects of which the action of a remedy is particularly suited. For it not unfrequently happens that the *cause* of any state is the keynote indication. A case of Rheumatism, for example, supervening on a wetting, will probably not be cured by the same remedy which would have cured if exposure to *dry* cold had been the cause. The effects of over-eating may resemble the effects of over-drinking, but a different remedy will probably be needed in each case. Shock due to physical injury will probably need Arnica; if due to fright, Opium will most likely be called for. I have often, in practice, wished for a tabulated list of “causes,” and I think this section will be found of value.

TYPE.

It will possibly be remarked that I have seldom indicated the relative importance of symptoms by difference of type. My reason is this: while not denying the utility of emphasising by conspicuous type symptoms of proved characteristic value, this can only be done at the cost of apparently depreciating symptoms not so marked. I have so often found my indications in symptoms not distinguished by special type at all, that I hesitate to put any under this ban. My arrangement, however, meets the difficulty to a great extent. If it is considered that, in a general way, all the symptoms I have mentioned under the heading CHARACTERISTICS are deserving of heavy type, and that the symptoms mentioned only in the Schema are worthy of italics, a very fair estimate of their value will be obtained.

GRADES OF HOMŒOPATHY.

Having had experience of every grade of homœopathic practice,

and knowing the possibilities that lie in all, I have sought in this work to supply the materials needful for the application of the Law of Similars in any of its modes. It is possible to obtain the needed correspondence in a great variety of ways and degrees, and one practitioner will find it in one way and another in another. Homœopathy uses phenomena as guides to reach the unseen activities operating below the surface. Keeping my attention steadily on the plane of phenomena, and disregarding all the hypothetical and ever-changing explanations of pathology and physiology, I have endeavoured to portray every feature of drug-activity that is likely to find its correspondence in the manifestations of disease. It may be in organ-affinity; it may be in coarse tissue changes; it may be in the finest sensations: my object has been to supply the practitioner of every grade with sufficient data for practice.

REPERTORIES.

If time serves, I may in the future provide a special Repertory to this work. In the meantime all the fuller repertories now in use will be available. It is impossible to practise homœopathy as it should be practised without the aid of repertories, and the best repertory is the fullest.

THE TEST OF A HOMŒOPATH.

Complaints are not unfrequently made that the homœopathic materia medica is too vast for practical utility; that the schematised lists of symptoms are unprofitable, if not impossible reading. I do not think so. Indeed, I think that the test of a genuine homœopath might not unfairly be said to lie in his capacity to read through a Schema with both profit and *enjoyment*—because of the possibilities it reveals of dealing with cases occurring every day in practice. Again and again in the course of my work I have come across symptoms in the Schemas of remedies reminding me of cases in the past which I might have cured had I but known the remedies then. And many a time a case has turned up in my practice calling for a particular remedy at the very time I have been working upon it, and a cure has resulted, when, but for my study of the Schema, I might more than likely have failed to find what was wanted. I think that the introductory sections preceding each Schema will make the study of the Schema profitable and enjoyable to some who have hitherto only found it dry. And when we consider that the *Materia Medica* is the very *raison d'être* of the homœopathist, and that in it he must live and move and have his being, it is not too much to expect of him that he shall at least give as much mind to its cultivation as is required for maintaining high proficiency, say, in billiards, or in golf.

EVERY HOMŒOPATH HIS OWN MATERIA MEDICA MAKER.

And now I have a final word to my readers. Every homœopath, in the last resort, must make his own materia medica for himself.

It is not alone what an author offers to a reader, it is what the reader can get out of his author that tells. I have done my best to put the matter in an orderly and tangible shape, but nothing short of hard work can make a proficient homœopath, no matter how handy his tools may be. I have selected paper for the book which will take ink, so that any reader may make annotations, corrections, or additions, as his experience or reading may suggest. If I had chosen to wait a few more years before publishing, I have no doubt I could have improved my work ; but if I had waited till doomsday I could not have made it perfect. In the meantime I want it every day for my own use ; and if I could have found any one else to do the work for me I should most gladly have spared myself the task.

ACKNOWLEDGMENTS.

I have already named some of the authorities whose labours have been freely drawn upon, but there are many others to whom my acknowledgments are also due. Among these must be mentioned that therapeutic genius only recently departed from us, Alphonse Teste, whose *Homœopathic Materia Medica Arranged Systematically and Practically*, I have largely quoted from. Whenever Teste's name is mentioned in the *Dictionary*, this is the work in which the reference will be found. I have used C. J. Hempel's translation. To Dr. E. B. Nash's *Leaders in Therapeutics* and *Leaders in Typhoid* I am indebted for many illustrations of remedial action. When not otherwise specified, all references to "Nash" will be found in the *Leaders in Therapeutics*. Dr. Oscar Hansen's *Rare Homœopathic Remedies* has supplied me with useful information regarding some of the less well-known remedies. Dr. H. C. Allen's *Keynotes of Leading Remedies*, his *Intermittent Fever*, and the pages of his journal, the *Medical Advance*, have been constantly drawn upon. Lastly, I must express my indebtedness in numberless ways to Dr. Dudgeon, whose unique knowledge of the *Materia Medica* has time and again stood me in good stead at the bedside ; and whose original works and translations of Hahnemann's writings have become part of the daily bread of modern homœopathy.

JOHN HENRY CLARKE.

30, CLARGES STREET, LONDON, W.,
July 4, 1900.

EXPLANATION OF ABBREVIATIONS AND SIGNS.

Books.

- M. M. P.—Materia Medica Pura of Hahnemann, Dudgeon's translation.
- C. D. P.—Cyclopædia of Drug Pathogenesis.
- B. P.—British Pharmacopœia.

Journals.

- H. W.—Homœopathic World.
- H. R.—Homœopathic Recorder.
- H. P.—Homœopathic Physician.
- Med. Adv.—Medical Advance.
- Amer. Hom.—American Homœopathist.
- N. A. J. H.—North American Journal of Homœopathy.
- H. M.—Hahnemannian Monthly.

Words.

- N. O.—Natural order.
- A. W.—Atomic weight.
- Esp.—Especially.
- R.—Right.
- L.—Left.

Roman figures following the name of a work signify the volume of the work, Arabic figures signify the page.

Signs.

- < means "aggravation," "worse," or "increase."
- > means "amelioration," "better," or "decrease."

These signs are used in the sense indicated, either as nouns, verbs (present or past tense), or adjectives. For instance: "Pain < by rest" may be translated "Pain *aggravated* by rest," or "Pain *worse* by rest." Here the sign is used in the adjective way. "< By rest" means that there is "*aggravation* by rest." Here < takes the place of a noun. "Motion < pain" means "Motion *aggravates* or *increases* pain." Here it is a verb. The idea is the same in all cases, and the sense obvious. "> By rest" means *amelioration* or *relief* by rest. "Motion > pain" means "Motion *relieves* or *decreases* pain." "Toothache > by cold" means "Toothache *relieved, ameliorated, or lessened* by cold." Sometimes the particle is omitted, but the sense is the same. "> Rest" means "Relief by rest." "Rest >" means "Rest *relieves.*" "*Kali bi.* has blindness with headache; blindness > as headache <." This means that the blindness of the *Kali bi.* headache *becomes better* as the headache *becomes worse*. I think the utility of these signs will be generally recognised, and the sense cannot be in doubt in passages where they occur.

Another sign which I have often found useful in my private notes I have introduced occasionally into the *Dictionary*. I mean the equation sign "=" in the sense of causation. "Causation" and "aggravation" are not always identical, though the influences which set up a morbid condition will generally aggravate the condition if existing already. I have used "=" as an indeclinable verb: "Motion = vomiting" means "Motion *causes* vomiting." "Heat = all eruptions to itch intolerably," means "Heat *causes* all eruptions to itch intolerably."

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A DICTIONARY OF PRACTICAL MATERIA MEDICA

Abies Canadensis.

Pinus canadensis. Hemlock Spruce. Canada Pitch. *N. O. Coniferæ.*
Tincture of fresh bark and young buds.

Clinical.—Indigestion. Liver disorder. Uterine displacement.

Characteristics.—*Abies can.* has been only imperfectly proved, but it has marked symptoms which will serve to indicate it in any case of disease in which they may be prominent: Great appetite, tendency to over-eat; gnawing, hungry, faint feeling in epigastrium. According to Hale it has cured: "A light-headed feeling, attended with a gnawing, hungry, faint feeling at epigastrium, craving hunger which, if gratified, was followed by distension of the stomach and hard beating of the heart." Among the peculiar sensations are: A feeling as if the right lung and liver were small and hard; pain beneath right scapula. The patient lies with the legs drawn up. Shivering as if the blood turned to cold water.

Relations.—*Compare*: *Abies nig.*, *Sabina*, *Thuja*, and other Conifers, *Nux vom.*

SYMPTOMS.

1. **Mind.**—Quiet, careless, but easily fretted.
2. **Head.**—Topsy feeling, a swimming of the head; light-headed.
3. **Eyes.**—Sensation as of a sty in outer canthus of l. eye.
8. **Mouth.**—Dryness of the mouth.
10. **Appetite.**—Gnawing, hungry, faint feeling at the epigastrium.—Craving for meat, pickles, and other coarse food.—Some thirst.—A tendency to eat far beyond the capacity for digestion.
11. **Stomach.**—Distension of the stomach and epigastrium; burning.
12. **Abdomen.**—Sick feeling in the bowels.—Rumbling in the bowels after eating, with great appetite.—Sensation as if the liver were small and hard; as if bile were deficient.
13. **Stool and Anus.**—Burning in rectum.—Constipation.
14. **Urinary Organs.**—Urinate frequently day and night; urine straw-colour.

ABIES NIGRA

16. **Female Sexual Organs.**—Thinks the womb is soft and feeble (thinks would cause abortion).—Sore feeling at the fundus of uterus; > by pressing.

17. **Respiratory Organs.**—Breathing laboured.—Sensation as if the right lung were small and hard.

19. **Heart.**—Action of the heart laboured.—Increased action of the heart with distension of the stomach.

20. **Neck and Back.**—Pain behind the right shoulder blade.—Weak feeling in sacral region.—Feeling as of cold water between the shoulders.

24. **Generalities.**—Hands cold, shrunken.—Skin cold and clammy.—Lies with the legs drawn up.—Great prostration, wants to lie down all the time.—Very faint, as if top of head were congested.—Twitching of the muscles.

26. **Sleep.**—Gaping, drowsy.—Great restlessness at night, with tossing from side to side.

27. **Fever.**—Cold shivering all over as if blood turned to ice-water.—Chills down back.

Abies Nigra.

Black or Double Spruce. (Northern part of North America.) *N. O.*
Coniferae. Tincture of the gum.

Clinical.—Constipation. *Cough.* *Dyspepsia.* *Eruclations.* *Hæmorrhages.* Hypochondriasis. Malarial fevers. Tea, effects of. Tobacco, effects of.

Characteristics.—The grand characteristic of *Abies nig.* is a sensation in the cardiac end of the stomach, or in the œsophagus where it enters the stomach, as if a hard body, as a hard-boiled egg, had lodged there. (*China* has the lump under the sternum, but higher up. Feeling in the epigastrium as if food were lying there. *Pul., Bry.*) Where this symptom is present, whether in dyspepsia, lung disease (when the sensation is as if there was a hard substance to be coughed up) with or without hæmoptysis, constipation, &c. *Ab. n.* will be the most likely remedy. The dyspepsias caused by abuse of tea or tobacco have been cured by it. Wakeful at night with hunger. Distress in the head, with flushed cheeks, often accompanies the dyspeptic symptoms of this remedy. In one patient to whom I gave it chilliness round stomach was removed and general chilliness greatly lessened. < After eating. "Pain in the stomach always comes after eating," says Guernsey.

Relations.—*Compare*: *Abies can., Cupressus, Thuja, Sabina* (all have painful indigestion), and other Conifers; *Nux v., Bry., Puls., Kali c., Nat. m.*; (effects of tea) *Thuja.*

Causation.—Tea. Tobacco.

SYMPTOMS.

1. **Mind.**—Very low-spirited and melancholy.—Nervousness.—Unable to think or study.

2. **Head.**—Dizziness.—Bad feeling in head.—Dull headache; severe.—Head hot, with flushed cheeks.

4. **Ear.**—Pain in l. external meatus.
9. **Throat.**—Choking sensation in throat.—Sensation of something sticking in œsophagus toward its lower end.
10. **Appetite.**—Hungry and wakeful at night.—Total loss of appetite in the morning, but great craving for food at noon and night.
11. **Stomach.**—Pain in the stomach always comes after eating.—Painful sensation as if something were lodged in chest, mostly on r. side of sternum, which had to be coughed up, though nothing comes, after taking food that disagreed.—Frequent eructations.—Continual distressing sensation about stomach as if everything was knotted up; worse whenever debilitated.—Sensation of an undigested hard-boiled egg in the stomach.
13. **Stool.**—Constipation.
16. **Female Sexual Organs.**—Menstruation delayed three months.
17. **Respiratory Organs.**—Easily gets out of breath.
19. **Heart.**—Heavy, slow beating of heart; sharp, cutting pains.
20. **Back.**—Pain in small of back.
24. **Generalities.**—Rheumatic pains, and aching in the bones.—Alternate heat and cold.
26. **Sleep.**—Sleepy during the day, but wakeful and restless at night.—Very bad dreams.

Abrotanum.

Artemisia abrotanum. Lady's Love. Southernwood. (Southern Europe.) *N. O. Compositæ.* Tincture of fresh leaves and stems.

Clinical.—Boils. Chilblains. Epilepsy. Gout. Hæmorrhoids. Hectic fever. Hydrocele. Indigestion. Lienteria. Marasmus. Myelitis, chronic. Nose-bleed. Paralysis. Rheumatism. Umbilicus, oozing from. Worms.

Characteristics.—The most prominent symptom of *Abrot.* is the wasting it causes, most marked in lower extremities. It has also an intense indigestion and morbid appetite. There are burning, gnawing, constricting pains, and sometimes vomiting of offensive matters. A peculiar sensation is as if the stomach were hanging or swimming in water. After a checked diarrhœa, rheumatism may ensue. Another great characteristic of *Abrot.* is metastasis; metastatic rheumatism. Metastasis of rheumatism from joints to heart; to spine. There is a sudden aching pain in back > by motion. Symptoms are < at night and in cold air. The face is wrinkled, pale, old-looking; feels cold; blue rings round eyes. It is suited to affections of newborn children, and especially little boys; hydrocele; epistaxis; emaciation. Oozing of blood and moisture from navel of newborn. I have cured with it indigestion with vomiting of large quantities of offensive fluid in a middle-aged woman.

Relations.—*Compare:* Absinth., Cham., Cina, Gnaphal., and other *Compositæ*; Nux and Agar. (chilblains); Bry., Bar. c. *Follows well:* Acon. and Bry. (pleurisy); Hep. (boils).

SYMPTOMS.

1. **Mind.**—Great anxiety and depression.—Child cross, depressed, very peevish.—Feels she would like to do something cruel; no humanity.—Thinking difficult.—Feels as if brain softening.—Excited, loquacious, like shouting, good-humoured, happy (secondary, after ceasing the drug).

2. **Head.**—Cannot hold the head up.—The l. brain seems esp. weak, easily tired by conversation or mental effort.—Sensation as of creeping chills along the convolutions of the brain, accompanied by prickling sensation.—Scalp sore, esp. l. side; itching.

3. **Eyes.**—Blue rings around dull-looking eyes.

5. **Nose.**—Nose dry.—Nose-bleed with boys.

6. **Face.**—Face wrinkled, as if old.—Comedones, with emaciation.

8. **Mouth.**—Slimy taste; acid.

10. **Appetite.**—Gnawing hunger; craves bread boiled in milk.—Ravenous appetite, and all the while emaciating.—Gastralgia with loss of appetite.

11. **Stomach.**—Sensation as if stomach were hanging or swimming in water, with coldness.—Pains cutting, gnawing, burning; < at night.

12. **Abdomen.**—Great distension of abdomen.—Weak, sinking feeling in bowels.—Hard lumps in different parts of abdomen.

13. **Stool and Anus.**—Food passes undigested.—Rheumatism after suddenly checked diarrhoea.—Alternate diarrhoea and constipation.—Protruding piles, with burning, from touch or when pressing.—Piles appeared, and became worse as rheumatic pains abated, with frequent inclination to stool, hardly anything but blood being passed.—Destroys worms, esp. ascarides.

15. **Male Sexual Organs.**—Hydrocele of children.

16. **Female Sexual Organs.**—Darting pain in left ovary.—Twitching in both ovarian regions, seems to extend to back.—Blood and moisture oozing from navel of newborn.

17. **Respiratory Organs.**—Cold air causes a raw feeling in respiratory tract.—In pleurisy when a pressing sensation remains in affected side, impeding free breathing (after *Acon.* and *Bry.*).

19. **Heart and Pulse.**—Pain across chest sharp and severe in region of heart; rheumatism.—Metastasis of rheumatism to heart.—Pulse weak and small.

20. **Back.**—Pains in sacrum.

21. **Limbs.**—Inability to move.—Marasmus of lower extremities only.—Soreness and lameness; worse mornings.—Chilblains itch; frost-bitten limbs.—Gout in wrists and ankles.—Inflammatory rheumatism before swelling begins.

24. **Generalities.**—Weak, sickly feeling; when excited, trembling.—Lame and sore all over.—Weak and prostrated after influenza.—Inability to move.—Numbness.

25. **Skin.**—Flabby; hangs loose; marasmus.—Furunculus; after *Hcp. s.*

26. **Sleep.**—Restless; frightful dreams.

27. **Fever.**—High fever (rheumatism).—Hectic fever, with chilliness, very weakening; (marasmus).