

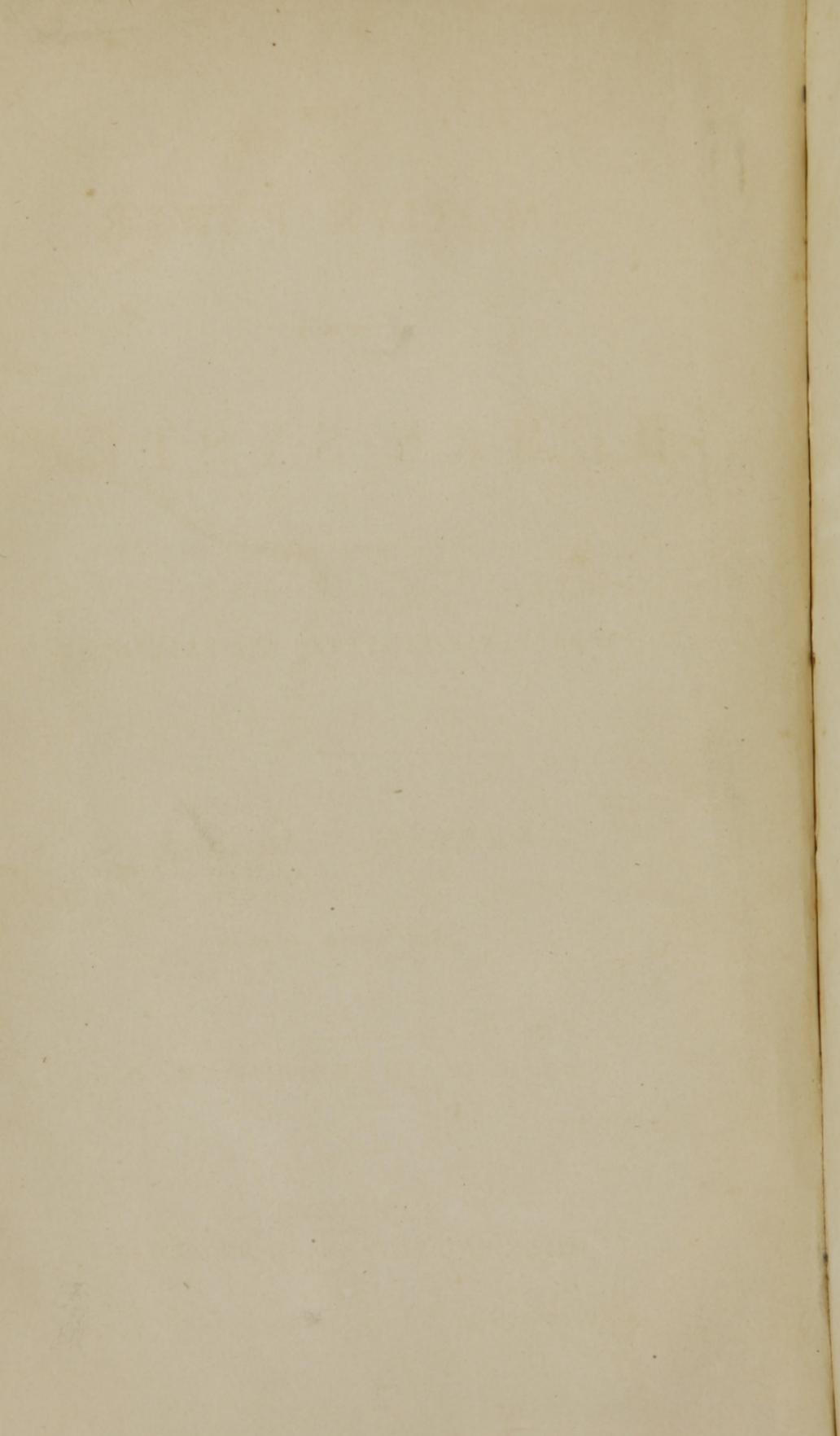
WBE
S554m
1847

Surgeon General's Office.

LIBRARY.

Section, *73*

No. *28602*



THE
MOTIVE POWER
OF THE
HUMAN SYSTEM,
WITH THE
DUODYNAMIC SYMPTOMS AND TREATMENT
OF
CHRONIC DISEASES.

TENTH EDITION, ENLARGED.

BY H. H. SHERWOOD, M. D.

NEW YORK:
WILEY AND PUTNAM, 161 BROADWAY.
1847.

215

Surgeon Genl's Office
LIBRARY
438602
Washington, D.C.

THE
MOTIVE POWER

WBE
S554^m
1847

Entered, according to the Act of Congress, in the year 1842, by
H. H. SHERWOOD, M.D.
in the Clerk's Office of the District Court of the Southern District of New York.

Entered, according to the Act of Congress, in the year 1846, by
H. H. SHERWOOD, M.D.
in the Clerk's Office of the District Court of the Southern District of New York.

P R E F A C E

TO THE SEVENTH EDITION.

A new edition of this work being demanded, the author has availed himself of the opportunity to enhance its value by much additional matter, of great importance and interest. In corroboration of the existence of tubercles in the brain which he had repeatedly advanced in opposition to the supercilious prejudices of the generality of the profession, and which he had discovered and demonstrated by the new symptoms which he had adopted in a long and successful practice, he has now the pleasure of introducing conclusive evidence of the fact, from foreign medical journals of established reputation. With regard, also, to the existence, formation, and symptoms of tubercles in a variety of other organs, he has adduced the decisive testimony of M. LUGOL, of Paris, in his recent very valuable and celebrated lectures. It will be seen that this distinguished physician confirms not only the author's general doctrine concerning the extreme prevalence of tubercles in nearly all the organs and other structures, but also of their formation in the bones, which he had previously insisted on alone, unsupported by a single authority, and with scarcely a hope of professional credence. It will be seen, moreover, that M. LUGOL fully agrees with him in the opinion that the ordinary means of diagnosing tubercles as well as the common mode of treatment, are wholly inadequate, erroneous and deceptive. And now that the enlightened and highly independent members of the American faculty have this under the seal and sign manual of *foreign* authority, they will probably be induced, sometime in the course of the present century, to honor it with their consideration, and direct their inquiries to the symptoms and treatment which should be preferred. In this event they may possibly discover that the symptoms which the author has for many years adopted, are constant and invariable, and that his treatment is rational, scientific and successful.

The other additional matter presented in this edition, embraces discoveries in physiology which are entirely new, and which may prove to be of inestimable value. They are not of course, submitted, with any great degree of confidence, to medical men in general, for the author well knows that the great body of his professional brethren are far too learned to learn any more; but to the candid and inquiring he submits these discoveries as facts which have come under his own personal observation, and concerning which he is neither deceived nor deceives. They will be found to afford a beautiful and almost boundless illustration of the magnetic organization of the human system for which he has contended in this and other works, and to harmonize in the most remarkable manner even with the diagrams which he had published long before these extraordinary confirmations had either been obtained or anticipated.

We said thus much in the Preface to the *third* edition of this work ; and now that three more editions have been exhausted, and a *seventh* has become in urgent demand, we think it proper to add the following pertinent and gratifying facts that have *ad interim* transpired.

The direct connection which we traced, many years since, between the posterior spinal nerves and the ganglionic or sympathetic system of nerves, and which has been denied and ridiculed by the great and little Solomons of the profession, has been demonstrated by VOLKMAN and BIDDER, the distinguished German anatomists, who distinctly traced it with the microscope. Thus the symptoms of disease, developed by pressure on the intervertebral spaces of the spinal column, upon which the author has successfully practised for much more than a quarter of a century, and which he has taught in this and many previous publications, are now conclusively established by other evidence and authority ; and it will soon be seen that the pathology, treatment, and remedies, which we have so long adopted, in consonance with our knowledge of these symptoms, will be confirmed also, as appropriate and indispensable.

Indeed, we may triumphantly claim that this confirmation has been achieved already, by the indubitable test of the electro-magnetic machine, now in very extensive use, and for a knowledge of which we refer the reader to our little work entitled " A Manual for Magnetising with the Rotary and Vibratory Magnetic Machine, in the Duodynamic Treatment of Diseases," sixth edition, enlarged.

As an additional corroboration of our views concerning the extensive range of tuberculation in the system, and its almost universal prevalence under various aspects of disease, we insert, in the present edition, an article entitled " Physiological and Pathological Researches on Tuberculosis," by H. LEBERT, M. D., from " Muller's Archives."

Still more interesting, to many readers, is the evidence which we present, in an extract from the " Animal Kingdom" of Emanuel Swedenborg, that this celebrated and truly wonderful writer was familiar with the laws of physiological magnetism, which we have hitherto advanced in utter unconsciousness of the existence of any such exalted authority in their support, and as the fruits of our own researches alone.

INTRODUCTION.

In order to ascertain the unknown causes of obvious effects, one of two modes is generally adopted. In the one usually chosen, in accordance with common philosophy, theories are first constructed, and then facts collected to confirm them; but a sufficient number is very rarely found for this purpose, and these theories, resting on slight foundations, are consequently almost always fallacious. In the other mode, which is according to inductive philosophy, a great number of corresponding facts is collected, and the theory or knowledge derived from a comparison of them is true and substantial.

The latter mode should always be adopted to establish a theory on a foundation that cannot be overturned. For if a theory in philosophy be true, the number of comparative facts that may be brought to its support, is absolutely innumerable and without end. So that if a certain number of facts is not sufficient to satisfy any person of the truth of the theory, any additional number can be presented to him, that may be necessary for such purpose.

The theory upon which this work is founded, is the result of that inductive process which has elicited the true causes of universal motion, and the laws by which it is governed; and the demonstrations on the electro-dynamic rings have since placed the hypothesis beyond doubt.

The part of this theory which belongs to the human form, and to chronic diseases, derives, from the causes of motion, new and invariable symptoms of those diseases which belong to the class hypertrophy, or chronic swellings of the organs and limbs; and the laws of magnetic motion explain the causes of their phenomena.

When the discoveries thus made, were compared with the various theories of the medical profession on these subjects, it was easy to see how fallacious the latter necessarily were, and with what ease they might be overturned and buried for ever in one common ruin.

The effect of the common practice in this class of dissases, has long been known to be uniformly injurious when carried beyond the mere object of palliating an occasionally urgent symptom, and is therefore exactly what we should expect to arise from an entire ignorance of the laws of organic and molecular motion, and of the symptoms dependent on these laws.

As there *may* be physicians who, from motives of interest, would be unwilling to acknowledge as much, I shall here copy the opinion of the late John Armstrong, M.D., one of the most enlightened men that ever adorned our profession. He was also one of our best medical authors, and was universally so considered.

“If any one were to assert, in unqualified terms, that medicine is a conjectural and vague art, it were easy to refute him, by proving its great certainty in many acute diseases; and if any one were to ask what part of physic is most defective, we might point out chronic diseases, since in them our efforts have hitherto been the most ineffectual. It is for want of having discriminated the general difference of results in the treatment of acute and chronic diseases, that some have so much underrated, and others so much overrated, the powers of the medical art. Speak of acute diseases, and we may justly maintain the present utility of our profession; speak of chronic diseases, and we must with regret confess its present imperfection. If any practitioner should be generally unsuccessful in the treatment of acute diseases, the fault must be his own, provided he be consulted in the earliest stages: for the united agencies of blood-letting, purgatives, mercurials, opium, and blisters, will commonly control the very elements of these diseases, when opportunely and judiciously directed; and if any one will still be so stubborn as to reject the use of some of the most powerful instruments which we possess, the failures are rather to be attributed to himself, than to the inefficiency of medical expedients.

“As we cannot make such a confident declaration as to chronic diseases, though we can often palliate and sometimes cure them, we are constrained to acknowledge, either that their nature is more irremediable, or the means employed are less efficacious.

“The means which we administer in chronic diseases are numerous, but most of them ambiguous, and questionable at the best; whereas in acute diseases, our means are few, and their operation plain and indisputable. The long catalogue of prescriptions for chronic diseases, at once indicates, that all is not right in our pathology, as it implies that each prescription is liable to fail, and that the whole may be successively required.

“Wherever we have any thing like principles to guide us, *our prescriptions are extremely limited*; wherever we have no fixed principles to guide us, *our prescriptions accumulate with empirical rapidity*. But what, it may be reasonably enquired, is the principal cause of all this complexity of formulæ in chronic diseases? Undoubtedly it arises from that vagueness of opinion which exists respecting the nature of these diseases in their onset, and in the greater part of their progress; and so long as we attempt to cover our ignorance by such terms as *nervous, bilious, dyspeptic, spasmodic*, and the like, so long shall our practice be mere experiment in most chronic affections. We may make a sort of druggist’s shop of the stomach of every patient laboring under chronic disease, by alternately cramming it with most of the articles of the pharmacopœas; but we shall not, probably, advance in the treatment, until we deduce pathological principles, from *cautiously marking the rise and progress of the symptoms*,

and exploring their seats and effects. For several years past, it has been part of my employment to collect facts on chronic diseases, and as the enquiry will not be completed for many years to come, in the mean time I offer a few brief results of my observation and experience in regard to them, &c.*”

Such is the testimony of Dr. Armstrong and I may add, that of every other physician whose opinion is of any value.

Notwithstanding, however, such testimony, which is verified by every day experience, a great majority of the profession are following the examples of the most arrant quacks, in pretending to be able to cure this class of diseases with the common remedies.

There are, also, some physicians, who, having given up every other remedy recommended in the books, still adhere to iodine, as a forlorn hope, notwithstanding it has been tested many thousand times by other physicians, and discarded as useless. Among the latter, I am pleased to be able to rank so distinguished a physician as Dr. Warren, of Boston. In a recent valuable work, he says :

“ A medicine has been introduced of late years, which has acquired much reputation in this and other forms of scrofulous disease. It is not surprising that physicians should with avidity take up any remedy which may promise to relieve so common and inveterate a disease as scrofula, especially one analogous in its character to those of which experience has most approved. I must say that after many years trial of the preparations of iodine, in various forms of scrofulous affection, I have rarely seen any distinct advantages from it.”

In speaking again of the cases in which iodine has been used, he says :

“ Preparations of iodine have not been efficacious in these cases, so far as I have used them. The tincture of iodine has been given to the amount of forty-five drops three times a day. This quantity was sufficient to produce diarrhœa ; but after a long use had no effect on the tumor. The same must be said of the hydriodates of soda and potassa, which I have frequently given in this and other scrofulous cases, in the dose of seven grains three or four times a day, till it irritated the stomach and bowels without influencing the cure.”

Entertaining the same views of our knowledge of this class of diseases, and of the remedies for it, with Dr. Armstrong, I commenced the investigation of the primary phenomena of this class of diseases in 1809, in a field, which had never been explored, with strong inducement to pursue it, and soon discovered new and unerring symptoms by which to distinguish the disease in any of the organs or limbs. The investigation of these symptoms unfolded the laws of motion in man and other animals, and a knowledge of these laws has enabled me to determine and apply

* Dr Armstrong did not live to finish the great and important task thus commenced.

the natural remedies for this class of diseases with great success during a period of more than twenty-five years.

In describing the cases, which I have introduced, to illustrate the new symptoms, and the action of the natural remedies for them, I have been as brief as possible, purposely avoiding reports of the state of the pulse, and other unimportant symptoms not necessarily belonging to the disease. Many of these are new cases not before published in my former medical work, which accompanied the remedies, and give a fair view of their continued progress in the cure of this class of diseases.

A great majority of the cases were first treated by other physicians, and besides mercury and iodine, had been under the use of a great variety of other remedies, and when these failed, many of the patients had resorted to root, steam, charm, Indian and cancer doctors, and to an endless variety of elixirs of health, purifiers of the blood, cough drops, panaceas, catholicons, and Indian specifics, and continued their use until they became satisfied of the futility of such remedies.

Some of these patients had taken from one to thirteen bottles of Swaim's Panacea, a compound of syrup of sarsaparilla and muriate of mercury, in imitation of the long known Lisbon diet drink. And although, from its frequent failure, very little dependance is now placed upon it, there can be no doubt that it sometimes exercises a favourable influence upon this class of diseases.

It will be observed by those who are acquainted with the classification of diseases, that I have added to the common and acknowledged cases of scrofula, a number of diseases not classed as such by nosologists or other medical writers; and I have done so, because the symptoms and the disorganizations, presented by dissections, are identical and uniform; and moreover, because they can always be cured by the same remedies, which demonstrate the unity of chronic diseases of this class, by which the practice is greatly simplified, and a knowledge of it easily attained.

I have substituted the term *tubercula*, from *tuber*, a knot, knob, or little swelling, for *scrofula*, a little pig; because there is a manifest similarity between the verbal sign and the thing signified in the one selection, and apparently none in the other. The disease is a swelling of the knobs, or little round organised bodies called lymphatic glands, pervading every part of the body with consequent hypertrophy, or general swelling of the organs, limbs, and other structures

CONTENTS

CHAPTER I.

Animal life—Excretions from the skin and serous membranes.—Negative matter gives out the positive force—Excretions from the mucous membranes—Positive matter gives out the negative force—Negative and positive forces maintained on different surfaces—Conducted through the nerves to the spinal cord and brain—Poles of the brain—Their number—Animal battery—Galvanic do.—Principles of identical—Triangles—Inverted cones—Laws—Repulsions expand—Attractions contract—Formation of the organs—Construction of the heart—Principles of its motion—Magnetic motions and animal motions identical—Inclinations—Sensations. 9

CHAPTER II.

Secreting system—Its organs and vessels—The secretions and chyle are all attracted to the heart, and the excretions repelled from it, to the internal and external surfaces of the body—Secreting and excreting systems of the vegetable kingdom. 26

CHAPTER III.

Magnetic forces innate in every kind of matter—Galvanic battery—The principles of—the same as the animal battery—The forces collected from the surfaces of membranes, identical with those collected from the surfaces of copper and zinc—Are more powerful in an organized than in an unorganized state—Form of organized forces geometrical—Sound and sensation produced by the action of these forces—Their power, velocity, and tenuity—Produce sensation, inclination, and motion. 32

CHAPTER IV.

Application of the motive power of the human body to determine the character of a large class of chronic diseases of the organs and limbs—Symptoms produced by it invulnerable—Cause of the symptoms—Tuberculations—Cause of the tuberculations. - 40

CONTENTS.

CHAPTER V

Repulsive force expands, and attractive force contracts—An organ or limb expands when its expansive force is prevailing over its attractive force—Nature reduces them by reversing this order—Two great divisions of matter—One of which repels and expands, and the other attracts and contracts—Alkalies and acids -- Chlorine—Chlorides—Bitumen and iron—Absolute quantity of the magnetic forces in matter—Mr. Faraday—Influence of magnetism on animals—Dr. Phillip—DIRECTIONS for using the magnetic remedies—Observations on them. 50

CHAPTER VI.

TUBERCULA OF THE LUNGS.

Tubercula of left lung, stomach, and liver—Of the right lung—Of right lung, heart, stomach, liver, spleen, kidneys, spine, intestines, and uterus—Of lungs—Of lungs and uterus—Of the lungs with excavations—Of the lungs and neck—Of the right lung with a large cluster of tubercles—Dr. Lawson's letter—Tubercula of stomach, heart, and eyes—Of the eyes—Of the antrum—Nose—Cerebrum and uterus—Stomach and uterus—Intestines and mesentery—Liver and stomach—Correspondence—Tubercula of the uterus, liver, stomach, and tonsils—Extract—Tubercula of the tongue, right tonsil, right leg, and right side of the neck—Lip—Uterus. 63

CHAPTER VII

TUBERCULA OF THE SPINE.

Lateral curvature of the spine—Caries of the vertebræ and distortion of the spine—Spine and neck—Distortion of the spine and lumbar abscess—Caries of the vertebræ—Lecture of M. Sanson on caries of the lumbar vertebræ, with observations on it—Tubercula of the neck. - - - - - 89

CHAPTER VIII.

TUBERCULA OF THE JOINTS AND LIMBS.

Tubercula of the knee, terminating in consumption—Of the ankle joint—Of the joints and limbs, with ulcers, white swellings, abscesses, and caries of the bones—Of the knee and mesentery—Of the neck and mesentery—Of the left foot and hip—Of the left leg—Of the hip joint—Of the heel and ankle joint, with abscesses and caries of the bones—Of the uterus and right leg—Colour of the skin in chronic tubercula—Tubercula connected with syphilis. - - - - - 101

CHAPTER IX.

MAGNETIC SLEEP.

Magnetic light and magnetic poles—Clairvoyant examinations of diseases—Clairvoyant examinations at great distances. - - - - - 186

Glossary. - - - - - 207

Index. - - - - - 208

THE

MOTIVE POWER OF THE HUMAN SYSTEM, ETC.

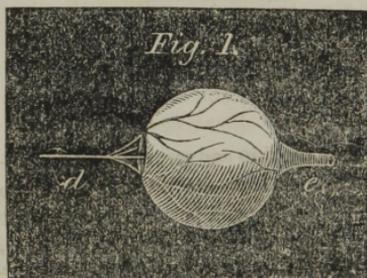
CHAPTER I.

Animal life—Excretions from the skin and serous membranes—Negative matter gives out the positive force—Excretions from the mucous membranes—Positive matter gives out the negative force—Negative and positive forces maintained on different surfaces—Conducted through the nerves to the spinal cord and brain—Poles of the brain—their number—Animal battery—Galvanic do.—Principles of identical—Triangles—Inverted cones—Laws—Repulsions expand—Attractions contract—Formation of the organs—Construction of the heart—Principles of its motion—Magnetic motions and animal motions identical—Inclinations—Sensations

THE phenomena which constitute animal life have hitherto baffled all the endeavors of physiologists to reduce them to those general laws which have rendered the study of inorganic matter so simple and comprehensive. Neither science nor speculation has enabled them to trace, with even an approximation to accuracy, the operation of those apparently subtle and mysterious principles which are the springs of motion, and which, in regulating the actions of animal life, connect the whole of its movements in one harmonious system. The mechanism of the different parts of the body has, consequently, been viewed as too complicated and intricate to admit of our applying the principles of inductive philosophy to the investigation of its diversified actions. Yet the philosophical mind cannot doubt but that they are dependent on laws as diffusive and comprehensive in their character, as those of gravitation, electricity or magnetism. Life, however, is generally conceded to be the result of the operations of the different structures which compose an organized body, or in other words the result of the actions of the various functions of a living system.

In studying this subject, it will be necessary to examine the different structures of organized bodies, and to understand their mechanism, as the mechanist understands a machine, before we shall be able to ascertain the kind of power by which they are moved.

On viewing the human frame, we find it covered with a membranous complex structure called the skin. Besides three membranes which are classed under the general term skin or integuments, there are found in it innumerable minute globular bodies called papillary glands. These little globate bodies are found to be highly organized, having minute arteries terminating, and minute veins commencing in their structure. They are found also, by means of magnifying glasses of great power, to have minute ducts issuing from them, and terminating every where with open orifices on the surface of the skin, as seen at *e*, fig. 1.



On an examination of the organs, as the brain, eyes, heart, lungs, liver, spleen, pancreas, kidneys, cystis, uterus, stomach, and intestines, we find them all, without a solitary exception, covered with a kind of skin called a serous membrane, in which is inclosed an incalculable number of minute glands or elementary organs, with ducts terminating in open orifices on the surfaces of these membranes, like those of the common covering of the body. The glands of both structures are found, on an examination of the orifices of these ducts, to *excrete* an aqueous or watery fluid by which these surfaces are constantly maintained in a humid or moist state. The great quantity of this fluid seen running off from the skin, and its accumulation in the cavities containing the organs, when these glands are excited to inordinate action, attest both the perfection of their mechanism and their fitness for their specific use.

If we now proceed to examine the membrane which lines the internal parts of the body, we shall find it, with slight modifications, characterized by the same structure as the serous membranes. This modification principally consists in its having what is called a villous, instead of a serous surface, like the serous membranes. We find the whole tract of the alimentary canal, including the mouth, œsophagus, stomach, and intestines, lined with this membrane, as well as the internal parts of every

organ, including even the ventricles of the brain. On a minute examination of the structure of the mucous membranes, we find them, like the skin and serous membranes, enclosing numerous little round or oval glands or villi, as they are termed, having, like the papillary glands of the skin, their appropriate arteries, veins, and ducts terminating with open orifices on the surface. They are farther characterized by numerous little cavities, crypts or follicles, as they are called, which have more or less a spheroidal shape, and which also open upon the surfaces of these membranes. These ducts and follicles are found to be filled with a semi-fluid or mucus, which is constantly issuing from them, and which spreads upon these membranous surfaces.

In pursuing this subject, we have thus found two different kinds of surfaces disposed in two different ways, and thus covered with two different kinds of fluids. These are extraordinary results of our investigations thus far, and will encourage us to proceed in them; for it is easy to see that there must have been some object in this order and disposition of these different kinds of matter.

On investigating the nature or qualities of these fluids, it is found that the excretions from the skin and serous membranes are more or less acid, and those from the mucous membranes more or less alkaline. They are sometimes so strongly acid and alkaline as to excite the curiosity of the most common observer. The acid is found to be the muriatic and the alkali, soda and muriate of soda or common salt. The acids and alkalis which possess directly opposite properties, and have at the same time the strongest affinities for each other, are universally diffused in the earth as well as in the vegetable and animal kingdoms. They constitute two great and principal divisions of matter, one of which the acid, for the sake of distinction, is called negative matter, and the other, the alkali, positive. Now it is satisfactorily ascertained, from repeated experiments, that each of these different kinds of matter gives out constantly an innate and different kind of force. It is also ascertained in the same manner that the alkaline or positive matter gives out the negative force, and that the acidified gives out the positive. The positive matter then, on the internal surfaces of the body and organs, is constantly giving out the negative force, and the negative matter on the external surfaces of the body and organs, the positive force. On a further examination of the human structure, we find four hundred and thirty-six muscles of different forms disposed in different ways for the purpose of producing motion. We know that they are formed for this purpose, for we can see that some of them expand, and others contract when we move the body or limbs. For when we bend an arm, we find that the muscles on the outside of it expand, while those on the inside contract. On extending the arm, we find this order reversed; for then the muscles on the inside

expand, while those on the outside contract with equal force. One end of each of these muscles is attached to the lower part of the bone belonging to the upper part of the arm, called the humerus, and the other ends are attached to the lower end of the bones of the lower part of the arm, near the wrist, called the ulna and radius; so that while the lower part of these bones is pushed on one side, when the muscles of that side are expanded, it is pulled at the same time on the opposite side, when the muscles on that side are contracted; and thus motion is produced by the simultaneous action of these muscles.

Now it is a remarkable fact, that every one of these four hundred and thirty-six muscles which thus produce motion in different parts of the body, is covered with a membrane, the outer surface of which has a serous, and the inner side a mucous surface; hence these membranes are called muco-serous membranes. All these different surfaces, then, like those of the skin and membranes of other parts of the body, are covered with different kinds of matter, presenting together immense surfaces, from which constantly issue two forces of different kinds.

The reader who has seen a common galvanic battery, cannot fail to observe that this arrangement of surfaces corresponds with that of the different metallic surfaces of the battery. He will also notice that these forces thus maintained on these membranous surfaces, exactly correspond with those necessarily maintained on different surfaces of the battery. The two forces are conducted from the two metallic surfaces to the poles of the battery by two metallic wires, and if we can now find conductors to convey the forces from the skin and different membranous surfaces to poles, the resemblance will be complete and satisfactory.

In pursuing this object we first find numerous minute threads, called nerves, penetrating the little glands of the skin, surfaces and mucous membranes, and every fibre of a muscle. On tracing these nerves, we see them uniting together and increasing in size in proportion to the distance from these surfaces, and at length conjoining with the spinal cord. The spinal cord is formed into four columns, united first with a broad base, and then with the brain.

These forces are therefore conducted from the skin and membranous surfaces and concentrated in the brain to form poles, or a motive power to put in motion this apparently complicated yet really simple machinery.

This structure, arrangement and order of the different parts of the human body were well known to Malpighi, Ruych, Haller, Hunter and Bichat, and are recognized by every anatomist of the present age, and now present to our view a Galvanic Battery altogether superior to any ever made by man.

The cut, fig. 2, gives a general view of the nerves of the limbs, of the

spinal cord, and of the connexion of the spinal nerves, all of which are well known to be good conductors of the Galvanic forces.

FIG. 2.



A back view of the spinal nerves connected with the organs and limbs, and with the brain through the spinal cord.

Also, a view of a perpendicular section of the back part of the brain.

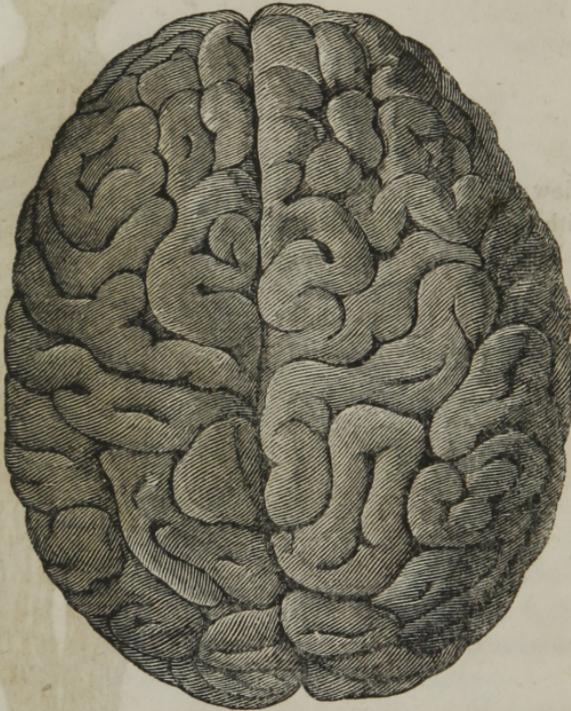
A. Cerebrum.

B. Cerebellum.

We will now examine the construction of the brain and see if we can find the situation of the magnetic poles. The upper part of the brain called the cerebrum, is divided by the longitudinal sinus from A to B,

FIG. 3.

A



B

into two hemispheres as seen in the figure, A being the front and B the back part of it. The whole presents a convoluted surface, the sulci or furrows of which extend into it a distance from a line to an inch, and thus separate more or less the convolutions, or phrenological organs of the brain. This figure was copied very accurately by Dr. Anderson of this city, from a cast of the brain by L. N. Fowler. The general form and direction of the convolutions are very regular and constant, in the human brain. Yet the form of the convolutions are different in the different hemispheres as seen in the figure;—one of them being a positive and the other a negative hemisphere.

On turning the brain over or reversing its position we find on its under surface an apparently complicated structure surrounded by convolutions as seen in fig. 4.

FIG. 4.



The brain proper or cerebrum is divided by anatomists into **three lobes.**

A A, anterior, **D D**. middle, and **B B**, posterior lobes.

A B } are the right and left hemispheres of the brain.

F F, The cerebellum.

e, The pons varolii, or Tuber Annulare.

f, The Medulla oblongata.

r r, The Corpora Pyramidalia.

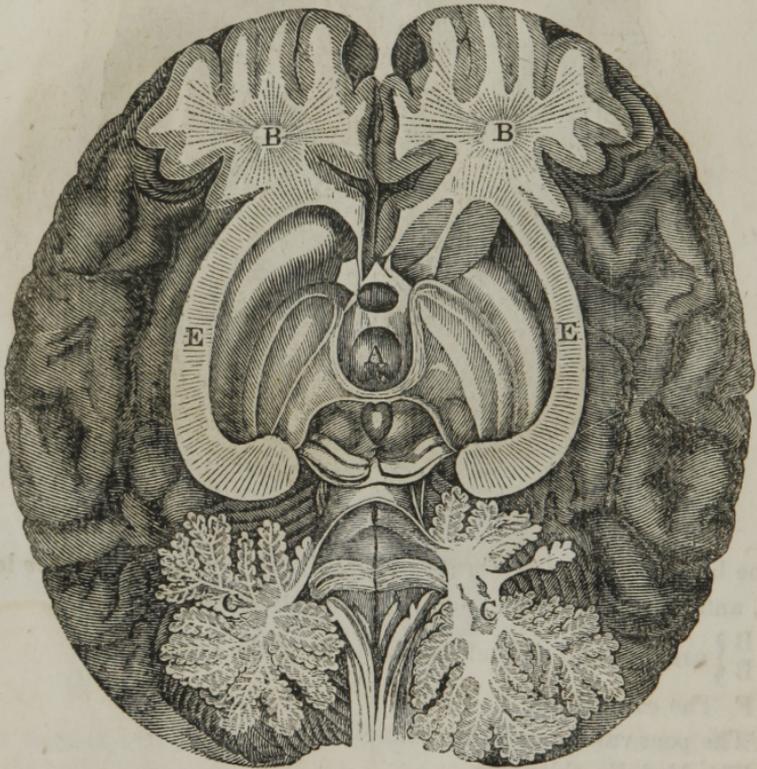
s s, The Corpora olivaria.

t t, The Corpora restiformia.

1. First pair, or olfactory nerves.
2. Second pair, or optic nerves.
3. Third pair nerves, or motores oculorum.
4. Fourth pair nerves, or trochleares.
5. Fifth pair.
6. Sixth pair.
7. Portio dura of the seventh pair.
8. Portio Mollis of the seventh pair.
9. Glossopharyngeal nerves.
10. Par vagum.

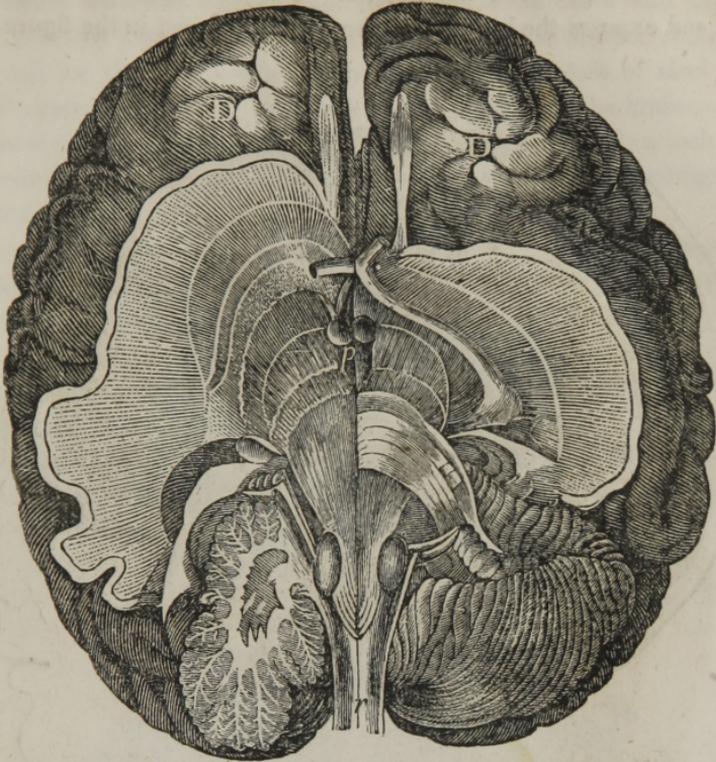
On dissecting and removing a section of the upper part of this surface by horizontal incisions, we have a fine view of the interior arrangement of the brain. We see here vegetative radiations from the centre of both lobes of the little brain C C, fig. 5, like the stems and leaves in vegetation.

FIG. 5.



Radiations are also seen to extend apparently from the third ventricle A, through the corpus callosum, or great commissure of the cerebrum E E. Radiations of the front part of the brain are also seen to converge to centres at B B, like the convolutions in the front part of the brain C C, fig. 4. These radiations are called stria, and the brain consequently said to be striated. The radiations from the centre A will be better understood by an examination of another dissection of the brain, fig. 6.

FIG. 6.

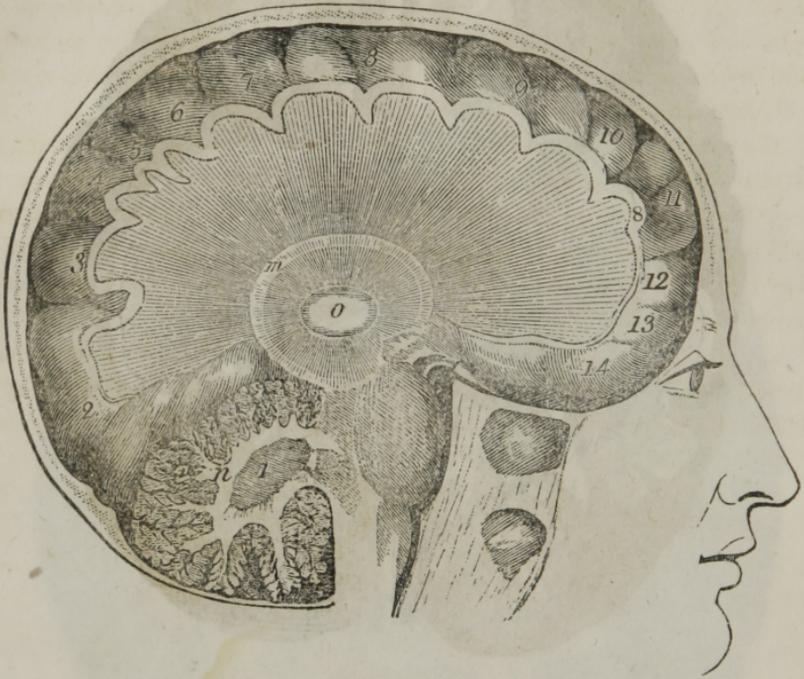


They are here seen radiating from the third ventricle or cavity *p* into the substance of the brain, and along the medulla oblongata and spinal cord *r*, and the convolutions in the front part of the cerebrum *D D* are here seen to converge to a centre like those in fig. 4.

In dissections, the radiations are also seen extending along the nerves, like those along the optic nerves seen in this figure, and from the spinal cord along the spinal nerves connected with the organs. So that the medulla oblongata, spinal cord, and spinal nerves, with those that issue from the central portions of the brain, appear like an elongation or continuation of its stria.

In fig. 7 we have a vertical section of the brain through the convolutions, inferior ganglion *m*, and the cavity of the third ventricle, in the centre of which is seen the letter *o*. This section is made through the right, and exposes the left side of the cavity, as seen in the figure.

FIG. 7.



The radiations extend from the surface of the ventricle into the substance of the brain, like rays of light. The colour of the central part of the brain is bluish white, and in the convolutions reddish grey. In both cases they are no doubt the consequence of the presence of iron, it having been ascertained that there is iron enough in forty men to make a plough-share, and as there is ten or eleven times the quantity of blood (which is also coloured with iron,) repelled from the heart to the brain, than there is to any other part of the same size, an estimate may be formed of the quantity of iron constantly in it, and consequently of its ability to maintain magnetic poles.

On an attentive examination of these views of the structure of the brain, it will be found to have five poles. A very large one in the centre, and four small ones in the circumference. One, unseen, radiating from the centre of the cavity *o*, one in the right lobe of the cerebellum, *n 1*, and another in the left, and one in the right and front part of the cerebrum *8*, and another in the left. This was seen to be an extraordinary number and arrangement of the poles, as we have been accustomed

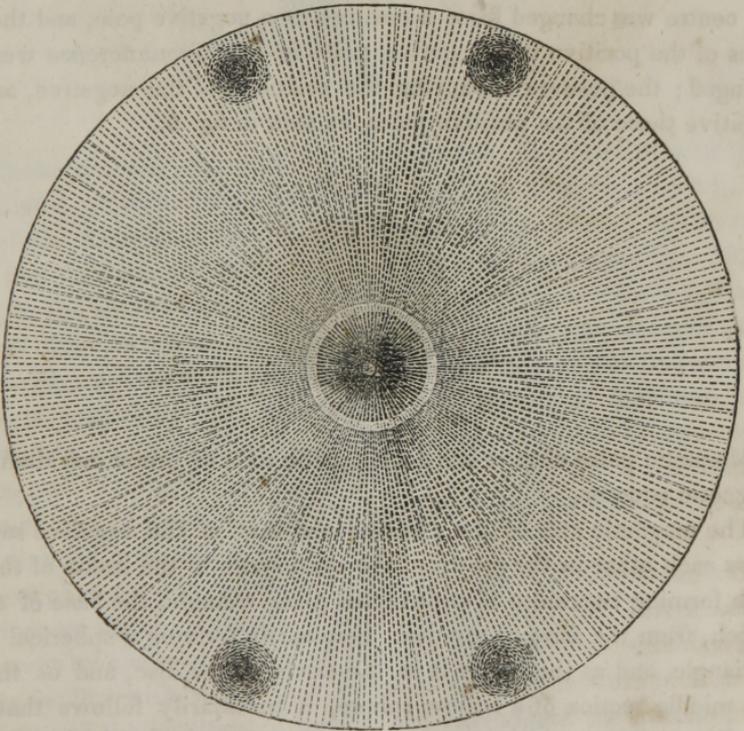
to the number and arrangement of two poles only—of a positive and a negative pole.

We must therefore see whether the magnetic forces would of themselves, without artificial aid, produce five poles in this order of arrangement, and for this purpose we may use a circular plate of steel which would correspond with a middle horizontal section of the brain. A circular saw plate, eight inches in diameter, and the tenth of an inch thick, with a hole in the centre of one inch in diameter, was accordingly subjected to actual experiment in the following manner:

The middle of the plate or disc was carefully let down in a perpendicular direction on the middle of the positive pole of the galvanic battery, and after having remained there a moment, was raised from its position in a perpendicular direction, turned over, and the opposite side of the plate placed upon and then removed from the negative pole of the battery in the same manner.

The plate was then covered with white paper, and fine iron filings were strewed over it, when they were immediately arranged by the forces in the plate in the manner seen in fig. 8.

FIG. 8.



This experiment was repeated eleven times on plates of from four to fifteen inches in diameter, and always with the same result. It may therefore be inferred to be constant. It presents one large and strong pole in the centre of the plate, and four smaller and weaker poles in the circumference, like those in the brain.

A line drawn from B through A to C, in the different hemispheres of the brain, fig. 5, would make about the same angle at A, with the line of division between the two hemispheres as would a line drawn from the poles in the circumference through the centre of the plate fig. 8, with a line drawn through the pole in the centre to the circumference from *a* to *b*. The halo around the pole in the centre of the plate corresponds also with the situation and appearance of the inferior ganglion in the side of the ventricle or small cavity, fig 7, and the pole must be enthroned in the centre of the cavity *o*, like that in the centre of the space in the plate, whence it must extend its radiating influence to the poles and convolutions in the circumference of the brain.

On applying the dipping needle to these poles, that in the centre and those in the circumference at *c c*, were found to be positive, and those at *d d* negative poles. When, however, the order of magnetising on the different poles of the battery was reversed, the character of the pole in the centre was changed from a positive to a negative pole, and the positions of the positive and negative poles in the circumference were also changed; the positive occupying the positions of the negative, and the negative those of the positive poles, as seen in fig. 9.

FIG. 9.



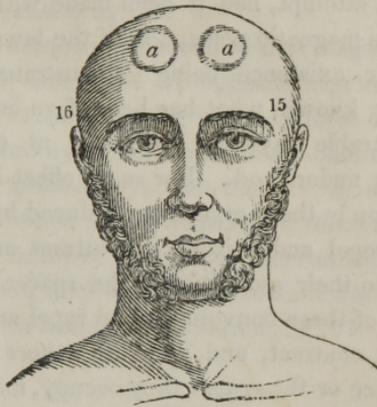
Magnetic poles always have a magnetic axis or prime meridian and a magnetic equator.

The magnetic axis of the positive and that of the negative satellites cross each other in the centre of the open space in the inside of the disc, each forming two sides of an inverted plane triangle, the base of each of which, from the form of the disc, necessarily forming a spherical side of a triangle, and as the latter is in the circle of the disc, and as this disc is a middle section of a hollow sphere, it necessarily follows that when a hollow sphere or body, more or less round, is magnetised in the same manner, inverted cones are formed. For as the disc is a section of a

sphere, so are the plane and spherical sides of the triangles, sections of inverted cones.

Magnetic poles, thus situated, would give to bodies, within their radiating influence, a form more or less round, according to the laws by which they are governed. The two poles in the two divisions of the cerebellum C C, fig. 5, accordingly give to these organs the rounded form. Phrenologists have placed the organs of causality, which investigate the phenomena of cause and effect, in the two convolutions of the brain which produce the prominences in the forehead *a a*, fig. 10.

FIG. 10.



And these are the convolutions in which the other satellites or poles are situated, as seen in fig 5, and as the right convolution is seen in No. 8, fig. 7. They have also placed the organ of comparison, which compares the observations obtained by the perceptive faculties 12, 13, 14, fig. 7, in the space between these poles, and tell us, without any knowledge of these magnetic phenomena, that they have the form of an inverted cone, as seen in this figure. From the situation of these organs, and their conformity with the magnetic phenomena of the brain, there can be little doubt that the matters and things perceived by some of the organs, and investigated and compared by others, are decided in the centre of the 3d ventricle, and the voluntary motions and course of the body directed from that position.

These phrenological organs are largely developed, and form conspicuous prominences in the foreheads of some persons, and such individuals are seen, even by common observers, to excel others, and to be distinguished for the facility with which they compare their perceptions of facts, existences, and the qualities of bodies, and investigate the causes of phenomena.

These developements and mental manifestations have been observed by phrenologists, it appears, in a multitude of cases, by which they profess to have fully established the truth of the practical principle deduced from these, and from like observations extended to other convolutions of the brain and their functions, viz : that other conditions being equal, the relative size of the organs will measure the strength of their respective faculties.

These facts, by which they claim to be able at any time to verify the principle, appear to be well known to this school of mental philosophers ; but an explanation of the facts, or reasons for the truth of the principle, they seem never to have attempted to give. Nor could they have been successful in such an attempt, had it been made without a knowledge of the existence of these magnetic poles, and of the laws by which they are governed. But their existence being demonstrated, and the laws of magnetic action being known, what has heretofore been a sealed enigma, involved in impenetrable mystery, becomes at once so plain and simple as to be easily understood. For as no effect is produced without motion, and as motion in these organs is produced by the action of these forces, and as they repel and expand, and attract and contract, with a power proportioned to their quantities in the spaces they occupy, it follows that the power of these convolutions to repel and expand some perceptions, and attract, contract, and compare others with facility, is in proportion to their size or the spaces they occupy, modified, however, by differences in the strength of the poles, in the perfection of the conductors of these forces from the primary pole to the convolutions, and by various degrees of approximation towards perfect symmetry of organization in different individuals. The motions of these forces being perfect, according to their laws, they consequently act with the greatest facility in a perfect, and with the greatest difficulty in a very imperfect organization. We accordingly find the talents of individuals to increase in the ratio of their perfection in organization, from the most imperfect in the idiot to the most perfect in individuals of the greatest capacity. And as certain knowledge obtained through some of these convolutions is perfect in some persons, it follows that an individual having a brain perfectly developed and symmetrically formed in all its parts, would be capable of, and might acquire perfect knowledge in all its departments.

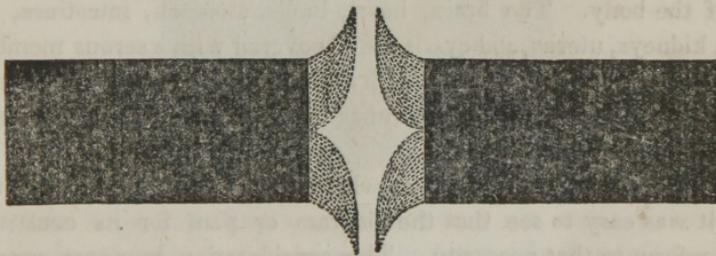
Phrenologists give to these different organs, or convolutions, different names expressive of their different faculties as follows :

- No. 1. Fig 7, Amativeness, or sexual-love.
2. Philoprogenitiveness, or love of offspring.
3. Inhabitiveness, or attachment to home.
4. Concentrativeness, or power of mental concentration
5. Approbativeness, or love of approbation.

- No. 6. Self-esteem.
 7. Firmness.
 8. Reverence.
 9. Benevolence.
 10. Imitation.
 11. Comparison, or power of comparing one thing with another
 12. Eventuality, or power of observing action.
 13. Individuality, or power of observing existence.
 14. Language, or power of using verbal signs.
 15. Tune, or power of perceiving unison and harmony of sound,
 see fig. 10.
 16. Destructiveness, fig. 10.

It is a matter of common observation that magnetic poles of the same denomination repel, and those of opposite denominations attract each other, and in order to ascertain the degree of force with which they repel and attract, it is found by experiments, conducted on the most rigid principles of inductive philosophy, that they repel and attract each other with a force proportioned to the quantity of these forces in given spaces, or the spaces they occupy. It is also ascertained, in the same manner, that when they repel, they expand, as seen in the case of iron filings attached to poles of the same denomination, fig. 11.

FIG. 11.



And when they attract, they contract, as seen in the case of iron filings attached to poles of opposite denominations, fig. 12.

FIG. 12.



with a force proportioned to their quantities in the spaces they occupy. The two poles, then, of the same denomination in the opposite hemispheres of the brain may, through the spinal nerves attached to these hemispheres, expand one set of muscles on one side of the body, limb, or organ, at the same time that those of the opposite denomination contract the antagonist muscles on the other; for the muscles, like the organs and nerves are necessarily double for the purpose of producing motion by their simultaneous action.

They may also expand one set of muscles by the repulsive, and contract their antagonists by the attractive force; in the same way that one metallic wire is expanded with the repulsive, and another contracted with the attractive force. Thus when by the mere exercise of an inclination, excited by a sensation, we incline to expand one set of muscles to extend a limb, we incline to contract their fellows at the same time; so that when one muscle expands, its fellow necessarily contracts; and when another contracts its fellow expands.

These motions called attracting and repelling are, in other words, the pushing and pulling motions: and if motion is produced in man and other animals by the action of these forces, we ought to be able to recognize the same motions in the fluids of the body, whether æriform or aqueous, and also in the organs by which they are moved.

On a minute examination of this subject, we find that in the formation of the organs, the same order is observed in the distribution of the membranous surfaces as in the formation of the external and internal surfaces of the body. The brain, heart, lungs, stomach, intestines, liver, spleen, kidneys, uterus, and cystis are all covered with a serous membrane, and their inner surfaces are lined with a mucous membrane. On observing the action of the air and of the lungs in breathing, we instantly recognize those motions.

In reflecting on the great power which it was necessary to give to the heart, it was easy to see that the diagram or plan for its construction must conform to that necessity. This consideration, however, presented no difficulties, for the sources from which it might derive the necessary strength and durability, under the action of these forces, were abundant and we accordingly find its strong muscles surrounded by additional membranes, presenting extensive surfaces for the accumulation of these forces.

On an attentive examination of the action of this organ, and of the motion of the blood in the arteries, we again recognize in both, and in the clearest manner these motions.

The heart is constructed and acts on the principle of the pump; the fluids being attracted through the veins and other absorbent vessels in

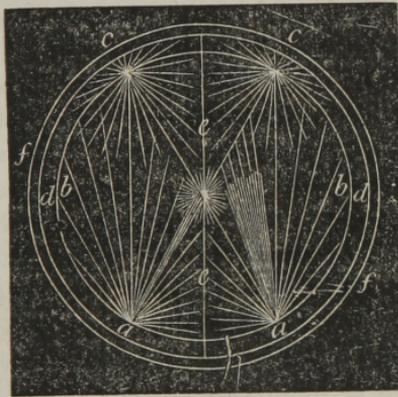
steady streams to the heart, with an intensity of force equal to that with which the ventricles repel them through the arteries.

Every repulsion of a fluid, in elastic bodies, produces expansions, and every attraction is succeeded by contractions of these bodies, according to a law of these forces, viz: repulsions expand, and attractions contract with powers proportioned to their quantities in given spaces.

Every repulsion of the heart, repels or pushes the fluids in the arteries, and every attraction pulls the fluids in the absorbent vessels.

The motions of the pulse correspond exactly with these laws and these motions; for every repulsion is succeeded by an expansion in the artery, and every attraction by a contraction of it. The same phenomena is found in the hose of the fire engine when in motion. The water moves in the hose from the cistern or hydrant in a steady stream to the engine, and from the engine through the hose with the motions of the pulse.

When the heart is laid open and distended in a circular manner, as seen in the following figure, it is found by the manner in which it is constructed



to have four large poles in its circumference; *a a*, and *c c*, the axis of which cross each other in the centre of the heart, like those of the circumference of the brain. The forces from the poles; *a a*, radiate along the ligaments or braces, called *columnæ cornea*, to the sides of the ventricles; *b b*, and the forces also radiate from the poles in the oracles *c c*, along their ligaments, as seen in the figure: all of which are first expanded and then contracted in the motions of the heart, by the action of the forces from the poles.

d d, walls of the heart; *e e*, septum or division between the auricles and ventricles, and equator between the poles; *f f*, pericardium or heart-case.

CHAPTER II.

Secreting system—Its organs and vessels—The secretions and chyle are all attracted to the heart, and the excretions repelled from it to the internal and external surfaces of the body—Secreting and excreting systems of the vegetable kingdom.

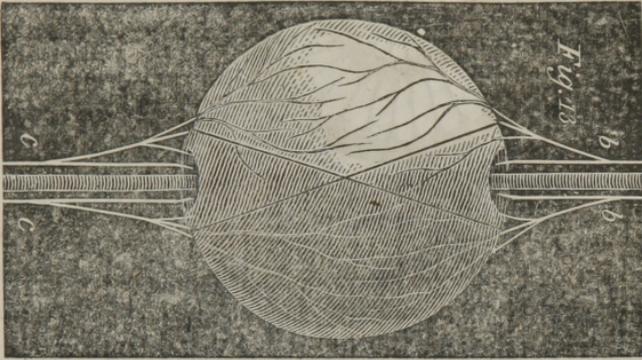
In our first chapter we attempted to give a concise view of the motive system which was formed for the purposes of motion. The excretions, it will have been seen, are attracted from the blood and then repelled from the body. On a farther examination of the human structure, we find another system in which chyle is attracted from the mass in the intestines; lymph, from the lymphatic glands, and fluids from the stomach as well as from every other cavity of whatever size or kind in the whole structure, and conveyed to the heart. We find, therefore, one formative system in which the fluids are attracted to the centre of the body, and a motive system by which they are repelled from it.

The existence of such a system as this is indispensable, not only to furnish the fluids necessary for the support and growth of the body, but to supply the waste of those that are necessarily repelled from it, to maintain its different surfaces in positive and negative states, for the purposes of motion.

This system consists of a vast number of minute vessels taking their origin with patulous or expanded orifices in almost every part of the skin, serous and mucous membranes, and in nearly all the most minute, as well as the largest cavities of the body. They unite and increase in size as they advance from these surfaces and cavities, in proportion to distance, in two divisions, one from the upper, and the other from the lower part of the body, and at length uniting with two large veins very near the heart called *venæ cavæ*. In their course to these veins they pass into and then out of a great number of glands, varying in size from that of a small seed to a large bean, which attract from the blood and mix with

the fluids in these vessels a semi fluid called lymph, and are hence called lymphatic glands. When these are viewed through a magnifying glass, we can see the vessels and the nerves *b b* and *c c*, penetrating the gland on one side and passing out of it on the other, as seen in fig. 13.

FIG. 13.

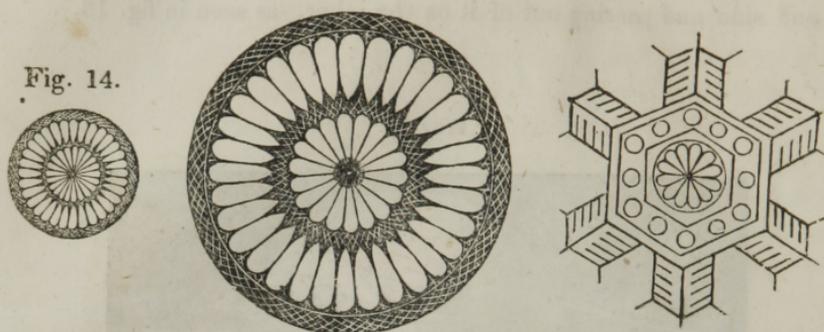


The lymph secreted by these glands is very thin, under the influence of the natural temperature of the body in health, but when it is reduced the lymph becomes more or less thick, according to the amount of the reduction, and its motion in these minute vessels becomes more or less difficult. Some of these vessels become entirely obstructed in this way, and the lymph secreted by many of these glands, is accumulated in them in consequence of these obstructions by which the glands themselves are expanded.

By these accumulations the glands are sometimes enlarged in various parts of the body, to the size of that seen in the figure, before they cease secreting, when the accumulated lymph begins to harden down, and sometimes in a few weeks or a few months becomes as hard as old cheese, and looks, as well as cuts like it. On opening the gland with a scalpel in this state, its interior presents a beautiful conglobate arrangement of the acini, as seen in fig. 14, and as the same is seen through a magnifying glass, fig. 15.

FIG. 15

FIG. 16



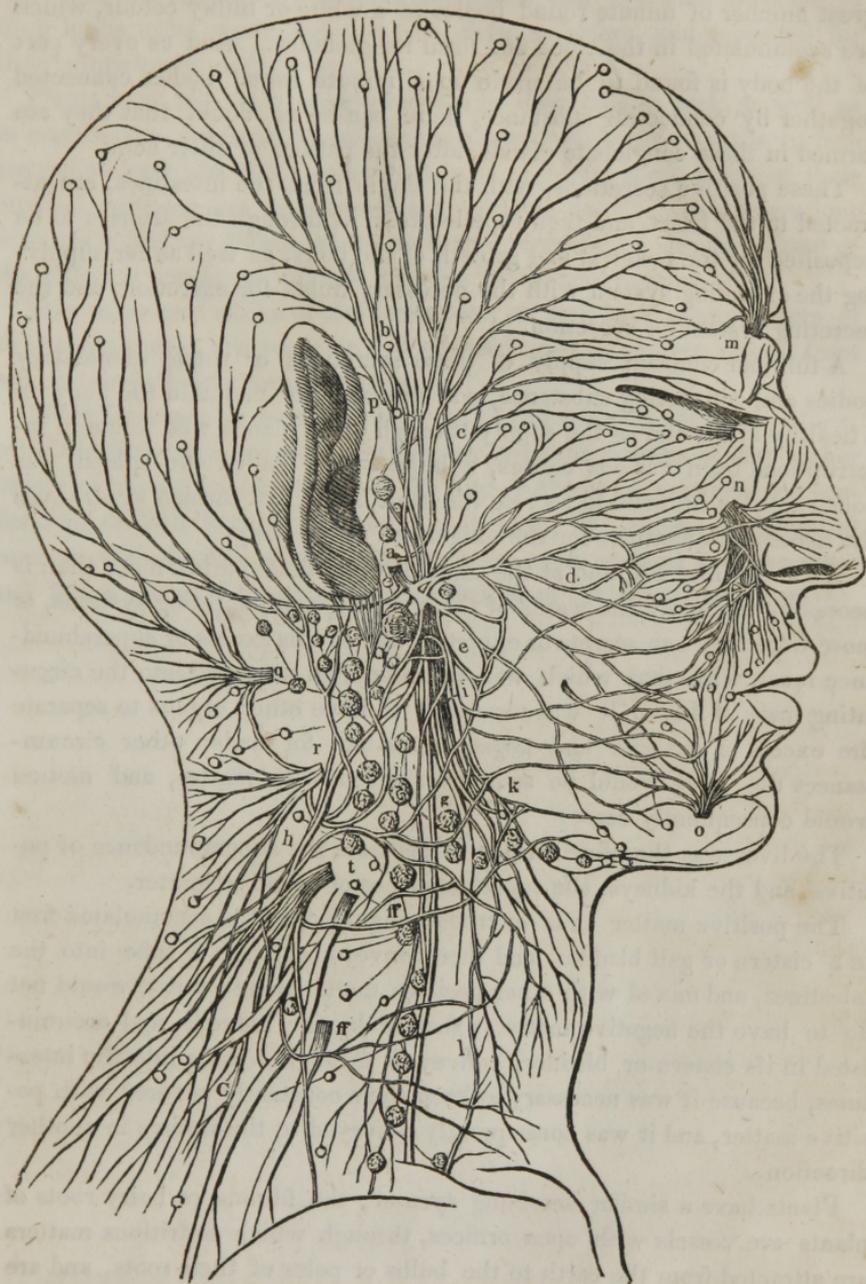
The organization, it will be seen, is geometrical, and constitutes a beautiful comparison with the conglobate form of snow, as seen through a microscope, Fig. 16, constructed geometrically in the atmosphere with the same forces that produce motion in the gland.

There are two classes of these glands in regard to size and situation which are connected with the brain, through the spinal cord, by the nerves of sensation, while the mucous glands of the mucous and mucoserous membranes are connected with it, through the same channel, by the motor nerves or nerves of motion. The lymphatic glands of the largest class are situated in places near the structures to which they belong, and are called by different names, according mostly with the names given to the places in which they are found, while their satellites, with which they are connected, or those of the smallest and most numerous class are situated in the substance of the structures.

The thymus gland of the first class is situated under the sternum or breast bone,—assists in the office of secretion for the infant, and disappears at an age when every other part of the animal system becomes perfectly developed. The pineal gland is situated in the brain, *glandula concatenata* or series of glands in the neck, the thyroid gland upon the cricoid cartilage in the lower and front part of the neck, the bronchial around the bronchial tubes, the cardiac near the heart, the axillary in the armpits, the dorsal along the dorsal, and lumbar along the lumbar vertebræ, the mesenteric in the mesentery or caul attached to the stomach and intestines, the pelvic in the pelvis, the sacral in the sacrum, the inguinal in the groin, and popliteal in the ham, &c.

The series of these glands along the neck with some of their satellites, together with the principal nerves of the neck and face with which they are connected, may be seen in Fig. 17.

FIG. 17.



This series, with that on the left side of the neck, is continued along the whole length of the spine under the names of dorsal, lumbar, and sacral glands before noticed

On an examination of the fluid that has passed through these glands on its way to the heart, with a magnifying glass, it is found to contain a great number of minute round bodies of a white or milky colour, which are accumulated in the blood and form its globules. And as every part of the body is found to be made up of minute round bodies connected together by connecting substance, there can be no doubt that they are formed in these conglobate glands, after the pattern of their acini.

These positive secretions, with the chyle from the intestines, are attracted to the heart, and then repelled from it through the arteries to be deposited for the renewal and growth of the body, as well as for supplying the excreting system with the necessary fluids for excretion, and the secreting system for secretion.

A full and constant supply of these secretions or round elementary bodies and connecting substance, was necessary to maintain the body in a healthy state, and as the supply through these glands was liable to interruptions from various causes, a large organ, called the spleen, was constructed with acini to secrete the same fluids, and furnish at all times the necessary quantities for the exigencies of the body.

We sometimes eat, and at the same or other times, drink more than is necessary to supply the wants of the secreting and excreting systems, or more than they can secrete or excrete; and as this excess or superabundance must, with that which was necessary, be attracted into the circulating mass of fluids, it was necessary to have other organs to separate the excess of positive and negative matter; for under other circumstances the body would be soon overloaded with matter, and motion would consequently cease.

The liver was therefore formed to separate the superabundance of positive, and the kidneys, the superabundance of negative matter.

The positive matter thus excreted might be, and is accumulated first in a cistern or gall bladder, and then conveyed through a tube into the intestines, and mixed with other positive matter there; but it would not do to have the negative matter excreted by the kidneys, and accumulated in its cistern or bladder, conveyed through a tube into the intestines, because it was necessary to keep them constantly covered with positive matter, and it was consequently conveyed to the surface in another direction.

Plants have a similar secreting system; the fibrous or hairy roots of plants are vessels with open orifices, through which nutritious matters are attracted from the earth to the bulbs or poles of their roots, and are thence repelled in other vessels through the whole of the cellular and vascular tissues of the plant, terminating in the vasa propria and conglobate glands, which secrete the peculiar fluids of the species.

These fluids are magnetised and changed from the positive to the ne-

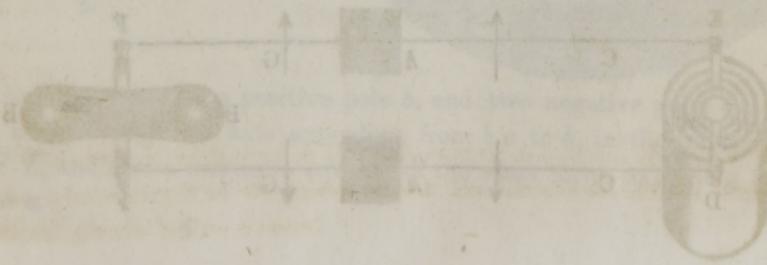
gative state in the leaves and buds or lungs of the plants, which attract and repel the air through appropriate tubes, and are then attracted to their bulbs to be again repelled from them as before, and deposited for their nourishment and growth.

Plants have also an excreting system in their skin or bark, as well as in membranes, similar to those of animals, and while those on the surface are maintained like those of animals in a negative state, those of their internal surfaces are maintained in a positive state. Their excretions from their globate glands in the bark and membranes, are like those of the different species of animals different in different species.

The calyx and stalks of the moss rose, as well as of many others of the same species, are more or less covered with prominent glands, from which is repelled an aromatic fluid.

Their fragrance or perfume, and that of the different kinds of willow, with the geraniums, as well as other nectariferous flowers of the higher orders of plants, are like those of the higher orders of animals, the productions of their excreting systems, and form, like theirs, a delightful contrast with the disgusting odours from the same systems in the noxious and lower orders of the vegetable, as well as of the animal kingdom.

3



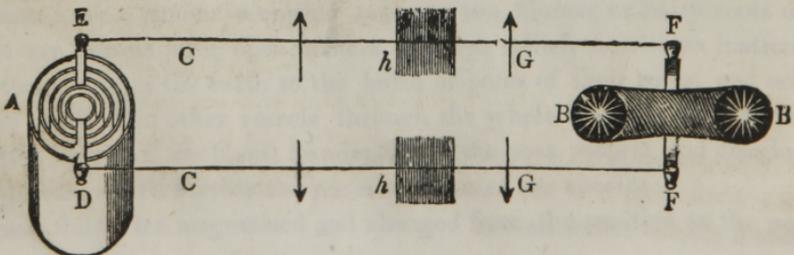
CHAPTER III.

Magnetic forces innate in every kind of matter—Galvanic Battery—The principles of, the same as the Animal Battery—The forces collected from the surfaces of membranes identical with those collected from the surfaces of copper and zinc—Are more powerful in an organized than in an unorganized state—Form of organized forces geometrical—Sound and sensation produced by the action of these forces—Their power, velocity, and tenuity—Produce sensation, inclination, and motion.

THE forces elicited from different kind of matter, and known by the names of electricity, magnetism, and galvanism, are now believed, by scientific men, to be the same, their effects only being varied by common causes; and there can now be no doubt that they are innate in every kind of matter, either in an organized or unorganized state, in quantities proportioned to the density of the matter or other ability to retain them; the quantity obtained from even one drop of water having been found sufficient to put a small battery in motion.

The common galvanic battery was first constructed by Galvani, and hence called the Galvanic battery, fig. 18.

FIG. 18.



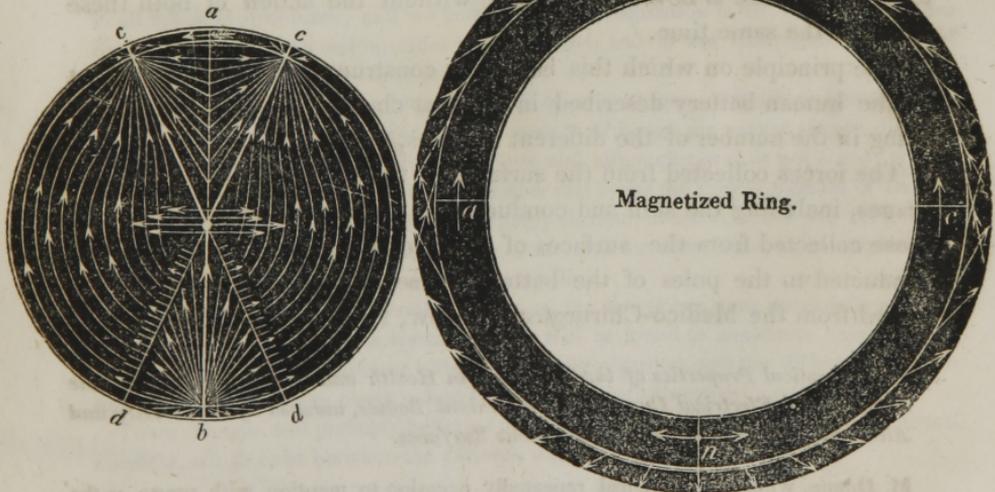
It is in two parts. A is the battery, and B B the poles connected with the battery A by two copper wires C C. The battery is constructed with alternate circles or layers of sheet copper and sheet zinc. The circles of copper are connected at D, and the circles of zinc at E. These connections terminate in thimbles, in which mercury is placed, to cover the ends of the copper wires, and connect them with the magnet.

The poles of the battery B B are made of round soft iron, bent in the form of a horse-shoe, and then wound with six coils of copper wire, covered first with oiled silk, and terminating in thimbles, as seen at F F. If the battery A be now placed in a jar of water in which a mixture of sulphuric and nitric acid has been poured, the acid begins to act upon the circles of copper and zinc, and the two latent forces being liberated by this action, are attracted separately along the opposite wires to the poles of the battery. The pole which is connected with the copper circles will be positive, and that connected with the zinc will be negative.

Iron and steel rings, discs, and iron and steel of any other form can be magnetised on the poles of such a battery, and one or more poles communicated from them to these metallic instruments, and from these to others.

A disc of saw plate, fifteen inches in diameter, and a tenth of an inch thick, drawn across the positive pole of the battery, on the line from *a* to *b*, fig. 19, is magnetised in the manner seen in the figure.

FIG 19.



It has three poles; a positive pole *b*, and two negative poles *c c*, and they have a magnetic axis extending from *c c* to *b*, in the form of the letter Y, and also a magnetic equator of the same form, extending from *d d* to *a*.

When the disc is thus magnetised on the negative pole of the battery, we find the same number of poles in the same situations, and the same form of the magnetic axis and magnetic equator, but the order or relative situation of the respective poles of opposite denominations is reversed, for a negative pole occupies the position of the positive, and two positive poles the position of the negative poles. We have, in this case, two inverted triangles, as in the case of the disc, fig. 9, magnetized on both poles of the battery, and the angles of the plane triangular sides of these triangles, with the line from *a* to *b* is the same as in fig. 9, while the magnetic character of the sides of these triangles is reversed—they being both a magnetic axis in the first case, while in the last, one is a magnetic axis, and the other a magnetic equator—the positive forces occupying the space inclosed in the latter triangle, and the negative forces the remaining part of the disc, as seen in the figure.

If we place a small compass on either of the wires of the battery, the needle will obey two opposite forces, called the resultant forces, *h h* projected at right angles to it, and not the one force which magnetized or *organized* the latent forces in the wire, and will point at right angles to it, as seen at *G G*. fig. 18.

The needle is magnetized with two opposite forces and obeys the two opposite resultant forces, and not the one force passing along the wire. So if one wire only is connected with a pole of the battery there is no motion of either force along the wire, but it commences at the moment the other wire is connected with the opposite pole, and demonstrates the axiom that there is never any motion without the action of both these forces at the same time.

The principle on which this battery is constructed is the same as that of the human battery described in our first chapter, the only difference being in the number of the different surfaces, conductors and poles.

The forces collected from the surfaces of the mucous and serous membranes, including the skin and conducted to the brain, are identical with those collected from the surfaces of the circles of copper and zinc, and conducted to the poles of the battery, as seen in the following article copied from the *Medico-Chirurgical Review*, for January, 1837.

On the Chemical Properties of the Secretions in Health and in Disease; and on the Existence of Electrical Currents in Organised Bodies, induced by the Acidity and Alcalinity of their different Membranous Surfaces.

M. Donne, whom we have had repeatedly occasion to mention with praise, is the author of some curious—would that we could add, well ascertained—statements on this subject.

All that we propose to do, is merely to present to our readers the leading results of his enquiries. They are contained in the following corollaries.

1. The whole of the tegumentary surface secretes an acid humour. It is however to be noticed that the sweat, instead of being, as it is generally stated, more acid in the axilla, and around the organs of generation, than in other parts, is frequently of an alkaline character.

2. The alimentary canal, from the mouth to the anus, except the stomach, (the gastric juice of which is strongly acid, as has been proved by Prout, Tiedeman, and Geminin,) secretes an alkaline mucus. Thus the saliva, and also the mucus of the pharynx and œsophagus, as far as the cardia, and of the intestinal canal from the pylorus to the anus, are alkaline in health; and becomes acid only in consequence of disease.

3. The serous and synovial membranes secrete an alkaline fluid: in disease, it sometimes becomes acid.

4. The external acid, and internal alkaline membranes of the body, represent the two poles of a galvanic pile, whose effects are appreciable by a galvanometer. For, if one of the conductors of this instrument be placed in contact with the mucous membrane of the mouth, and the other conductor be applied to the skin, the magnetic needle will be found to shew a deviation of 15 to 20, or even 30 degrees; and the direction of the needle proves that the mucous or alkaline membrane indicates a negative electricity, and the cutaneous or acid membrane a positive electricity.

5. Independently of these two great surfaces, exhibiting opposite electrical states, there are other smaller cognate systems, which are similarly opposed. Between the stomach, for example, and the liver, we may discover energetic electrical currents.

6. The acid humours of the system may become alkaline, and the alkaline may become acid, in a state of disease.

7. An abnormal acidity is usually the result of a phlegmasia; and this change may take place in an organ, at a distance from the inflamed part;—thus the saliva becomes strongly acid in gastritis.

8. The acid, developed during the existence of inflammatory disease appears to be most frequently the hydro-chloric. The presence of this acid may very possibly determine the coagulation of the albuminous part of the lymph, or serosity, which abounds in all inflamed structures; and we know that this coagulation is the cause of the false membranes, of specks and opacities of the cornea, and of the induration and hypertrophy of many parenchymatous organs.

Purulent matter is produced by the action of an acid upon albuminous lymph:—it is a species of combination of acid and albumen. Although we cannot always discover traces of a free acid in inflammatory effusions, and although pus does not always redden the blue paper of turnsol, we are to remember that by far the greater number of the humours of an animal body in health are strongly alkaline, and that in this way the generation of acid in disease may be masked or concealed for some time, in consequence of the neutralising of the original or primary alkali.

9. The alterations in the chemical nature of the secretions must necessarily react on the different functions of the system. They will be found to constitute an interesting groupe of lesions, or symptoms hitherto but little regarded, and the diligent investigation of which may very possibly lead to some important therapeutic results.

These changes will probably be found to induce certain modifications in the electrical currents, which exist between the different organs of the economy.

The needle it will be seen, obeys the forces of these different surfaces like those from the surfaces of the copper and zinc in the battery.

When the body is highly charged with these forces, strong poles are sometimes formed in the ends of the fingers, which the needle obeys

like the pole of the magnet, and they also sometimes give out sparks, like the battery, or the electrical machine, as will be seen by the following scrap :—

AN ELECTRIFIED LADY.—A correspondent of a late number of *Silliman's Journal*, states that on the evening of January 28th, 1839, during a somewhat extraordinary display of the northern lights, a respectable lady became so highly charged with electricity, as to give out vivid electrical sparks from the end of each finger, to the face of each of the company present. This did not cease with the heavenly phenomenon, but continued several months, during which time she was constantly charged and giving off electrical sparks to every conductor she approached. This was extremely vexatious, as she could not touch the stove or any metallic utensil, without first giving off an electrical spark, with the consequent twinge. The state most favorable to this phenomenon was an atmosphere of about eighty degrees Fh., moderate exercise and social enjoyment. It disappeared in an atmosphere approaching zero, and under the debilitating effects of fear. When seated by the stove, reading, with her feet upon the fender, she gave sparks at the rate of three or four a minute; and under the most favorable circumstances, a spark that could be seen, heard, or felt, passed every second! She could charge others in the same way when insulated, who could then give sparks to others. To make it satisfactory that her dress did not produce it, it was changed to cotton, and woollen, without altering the phenomenon. The lady is about thirty, of sedentary pursuits, and delicate state of health, having for two years previously, suffered from acute rheumatism and neuralgic affections, with peculiar symptoms.

We know that the two magnetic forces pervade every kind of matter from the fact that unmagnetized substances of the same kind repel, and that opposite kinds attract each other. The power with which they repel and attract is very weak however compared to that which is exerted by magnetized matter.

If we divide the inside of an earthen cup securely by a piece of bladder and then fill one side of it with water and pour a little of the same fluid with which a little acid has been mixed into the other side, the water in the former will be slowly attracted through the bladder, into the latter division, and is called capillary attraction; but if the wires from the galvanic battery are immersed in the different fluids, the fluid in the former is quickly attracted into the latter division. So the effect of unmagnetized iron and steel upon the magnetic needle is very little, but when they are magnetized or in other words organized with these forces, the effect upon it is seen to be very great.

When these forces are thus organized, they impart in geometrical figures according to their laws, a knowledge that is mathematical and therefore perfect, and like a thing of life this organized knowledge is easily destroyed by a blow.

Sound is produced by the action of the magnetic forces on organs constructed for this and other purposes, as the lungs, larynx, &c Musical instruments are therefore necessarily formed to produce all the varieties

of sound by the action of these forces ; and we hear the thunder produced by them when they burst from their confinement in the cannon, and from the clouds in the heavens.

Sensation is also produced by the action of these forces on the organs of sensation, such as the papillary glands of the skin and muco-serous membranes of the tongue, nose, eyes, &c.

Different sensations are necessarily produced by the application of different forms and states of different kinds of matter to the papillary glands of one form, of one kind and of one state, as in the application of a round or pointed body to the skin, either in a neutral or a very warm or cold state.

When this order is reversed, and the papillary glands are, from disease, more or less enlarged and altered in form and structure, sensation is increased in them by the accumulation of these forces. In this case, the natural round papillary form of these forces is retained, while that of the gland is altered. The sensibility of the gland is not therefore diminished, but is increased in proportion to the number of these forms or the quantity of these forces accumulated in it. Sensation, then, is in these forces, which are the foundations of the ultimate atoms of matter, and not in the matter or structure of the glands, and is as perfect in its opposite emotions of pleasure and pain, as magnetism is in its opposite characters of repulsion and attraction. Inclinations, agreeable or disagreeable, are concomitant of and belong to the opposite qualities of the sensations, like the expansions to the repulsions and the contractions to the attractions, and they follow them in the same order.

Sensation, inclination, motion, and form are then, in this order, the attributes of these male and female forces, and are the agents by which all nature is formed and animated ; by which the stars, sun, earth, planets, and their satellites were formed, animated, and are moved in orbits with unerring precision, and by which all the orders, genera, species and varieties of the vegetable and animal kingdoms were formed with a precision, and adorned with a beauty that defies imitation.

Nothing can therefore equal the adaptation of these forces to produce such results ; for besides their unlimited power, which can make a world tremble like a leaf, the great velocity of their motions and their great and almost inconceivable tenuity, enable them to penetrate the most minute orifices, and construct an infinite variety of bodies of every form and size, and produce motion in the smallest with the same geometrical accuracy as in the largest structures.

The subject of sensation, inclination, and motion in this order, is so interesting as to induce me to dwell further upon it, and copy from my case-book the following interesting case to illustrate these phenomena,

in which these forces are made to pass from one gland to another in a different part of the body, and produce sensation, inclination, and consequent motion.

The examination of this case was commenced and continued as stated, without any previous knowledge of it or of the persons present.

Mrs J. P. of Fairfield, Butler Co., Ohio, of good constitution, light complexion, and naturally full habit, aged 22 years.

Called to see her January 11th, 1835. She had a swelling on the right side of her neck and face, which commenced about the 10th of November last, and had been out of health about three years.

Suspecting tubercula, and without making further enquiries, and in the presence of a number of gentlemen and ladies, I commenced an examination of the lymphatic glands along both sides of the spine, and first with those of the first cervical vertebræ (joint of the neck next to the head,) and pressed with the finger upon one lying close to the right side of the vertebræ, and of the size of a very small bean. This pressure produced a scream from severe spasmodic pain, which on every repetition darted violently, and with the rapidity of lightning, into the external cervical and submaxillary tubercles, and into the upper jaw, ear, and right side of the head. On her complaining of its darting also into her throat, I examined it, and found two tubercles rising conspicuously in the right tonsil, and one in the gum of the upper jaw, all of which were very sore, and also painful under pressure. I now applied pressure in the same way to these cervical and submaxillary tubercles on the side of the neck and the under jaw, which produced the same kind of pain in them, and which at every repetition of the pressure, darted violently along the neck and under the clavicle, (collar bone,) into the upper portion of the right lung. I now applied pressure to the left side of the first vertebræ, on a still smaller tubercle, and she screamed again, and pointed her finger to the spot *the pain darted to*, on the upper portion of the left side of the neck; and on examination I found there a large submaxillary tubercle, and on applying pressure to this, the scream was again repeated, and she at the same time applied her hand to the left breast or mamma, and then pointed out the course of the pain from the tubercle (enlarged gland) along the neck and under the clavicle into the breast. I now examined the breast, and found it every where literally crammed with tubercles of the size of peas; it was one third larger than the right; colour of the skin natural. The other breast flaccid every where, and neither gland or tubercle to be felt in it or in the axilla of the left side.

The small tubercles along the right side of the other cervical vertebræ were sore or tender, and pressure on the upper ones sent darting pains into the right side of the neck, and on the left side of the lower one

into the region of the heart, and checked her breathing. Pressure applied now on the sides of the first, second, third, and fourth dorsal (joints of the back between the shoulders) produced pain which darted into the stomach; and on the second, third, fourth, and fifth lumbar, produced the most severe spasmodic pain, which darted violently into the uterus. Pressure on the sides of the other vertebræ produced no pain or effect whatever.

The same effect is frequently produced by pressure on these enlarged lymphatic glands in other cases, and I have, in many instances, applied the wire from the Galvanic battery to these tubercles in an active state of disease, when these forces would dart from one tubercle to an organ in the same manner as when pressed upon by the finger or thumb.

In experiments made on living animals, it is ascertained that if a principal nerve leading to and belonging to the stomach be severed with a scalpel, digestion ceases, but when that portion of it next to the stomach is connected with the wire of a Galvanic battery, digestion commences and progresses in the same manner as it did before the nerve was separated.

When the wire from the battery has been connected with the nerves of criminals, soon after they have been executed strong muscular action has uniformly commenced, evinced by violent contortions of the limbs, of the muscles of the face, and even breathing has sometimes commenced, accompanied with its natural sound.

These evidences are perfectly conclusive in regard to the identity of the magnetic forces with those that produce sensation, inclination, and motion in man and other animals, which with a great variety of other evidences afford interesting and beautiful illustrations of the action of the hitherto undefined and apparently undefinable nervous fluid, spirit or vital principle of physiologists.



Note. If figures of men, and women are cut out of paper, and placed between two suspended metallic plates, charged with electricity, or electro-magnetism, they will exhibit a *rapid dance*, as seen in the figure

CHAPTER IV

Application of the motive power of the human body to determine the character of a large class of chronic diseases of the organs and limbs—Symptoms produced by it invariable—Cause of the symptoms—Tuberculations—Cause of the tuberculations.

WE have in the former chapters given a concise view of the construction and of the motive power of the human body, as well as of the laws by which that power is governed. It now becomes a matter of interesting enquiry, to ascertain whether a knowledge of them can be applied to useful purposes for the benefit of mankind? The answer must be in the affirmative; for by adding to our general stock of knowledge, we elevate the character of our species, we add much to and increase our ability to attain more perfect information in its several departments.—Among these, the knowledge by which we are enabled to repair the different parts of the human structure, when they are out of order, and to maintain them in a perfect or healthy state is of the very first importance. And as the different structures are subject to different injuries, it becomes a matter of great importance to ascertain their natures, because different materials will be required to repair the different injuries to the different structures.

These injuries may be very naturally divided into three or four classes, the nature of all which may be invariably known by certain phenomena produced by the action of these forces.

The nature or symptoms of the injury, or of the disease in one of these classes called hypertrophy or chronic enlargement of the internal structures or organs may be known by the action of these *forces* under pressure.

In order to determine whether a person is affected with tubercular disease of the organs, we press with a finger or thumb on the vertebral spaces along the spine. If the person has the disease, there will be a place or places along the spine where pressure will produce pain. This pain, however, will be a mere tenderness of the part where pressure is made, in the *passive* state of the disease; but when the disease is *active*, this pain, (produced by pressure) will dart into the diseased organ with a violence which increases with the intensity of the disease.

We know, therefore, that if pressure on any of these spaces produces pain, the person must have the disease, because the secreting glands in the organs connected by their appropriate chain of nerves with these spaces must be enlarged and irritable when pain is so produced.

In order to determine whether the disease affects any part of the head, we press on the back part and sides of the first joint of the neck, and under the jaws. See Fig. 20.

In determining whether one or both lungs are tuberculated, it is necessary to press on the spaces on both sides of the last cervical or large and last joint of the neck and first dorsal, or first joint of the back; and if pressure on the right side produces pain, the right lung is tuberculated; but if pain is produced by pressure on the left side, the left lung may be tuberculated, or it may be the heart instead of the lung which is tuberculated, and produces this symptom, or both may have the same disease at the same time. In order to determine which is diseased, we may inquire whether the patient has a cough and expectorates, and whether he be subject to a hard beating of the heart. If he has cough and expectoration, the left lung is tuberculated, but if he has no cough, the heart, on examination, will be found to beat much harder than natural, and the sound of its action will be loud, and precisely like that of the churn, in churning.

In *tubercula* of the stomach, and its immediate appendages, called dyspepsia, pressure between the 2d, 3d, and 4th, and sometimes 5th and 6th dorsal spaces, (counting from the last or large joint of the neck,) produces pain.

In *tubercula* of the liver, called *chronic inflammation* of the liver, or *liver complaint*, pain is produced by pressing on the right side, between the 7th and 8th, and 8th and 9th dorsal spaces, and directly opposite to the lower part of the right shoulder blade.

In *tubercula* of the spleen, pain is produced by pressure on the left side of the last named, or 7th and 8th, and 8th and 9th dorsal spaces, and opposite to the lower part of the left shoulder blade.

In *tubercula* of the right kidney, pain is produced by pressure on the right side of the space between the 12th or last dorsal, and first lumbar vertebræ, and in tubercula of the left kidney, pain is produced by pressure on the left side of the 12th dorsal and 1st lumbar.

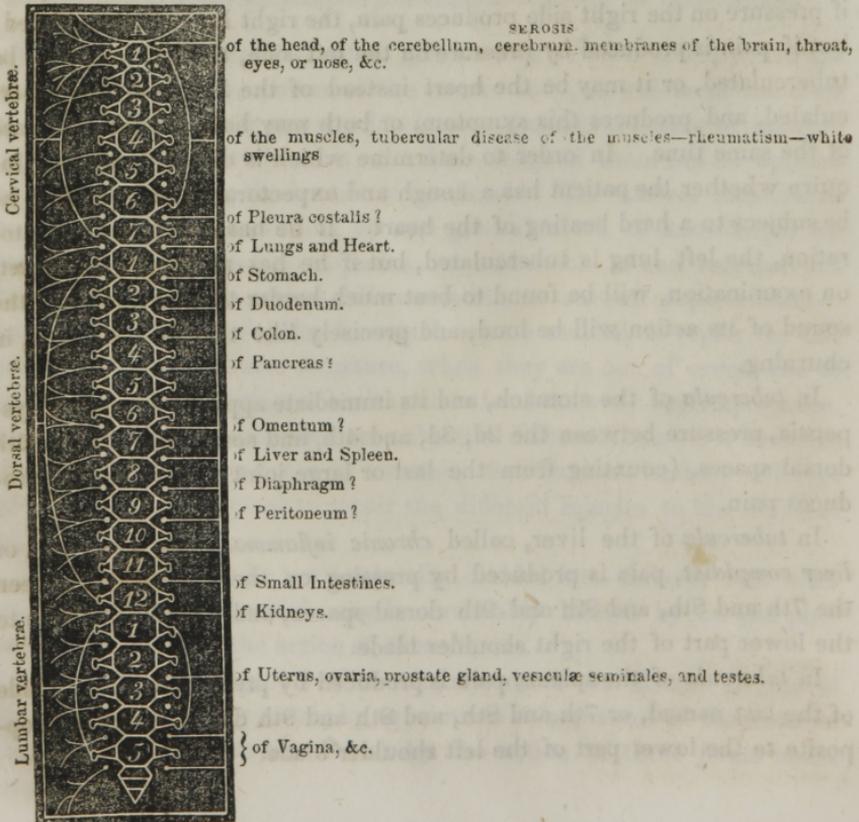
In *tubercula* of the uterus, called leucorrhœa, chlorosis, amenorrhœa, and menorrhagia, pain is produced by pressure, between the 2d and 3d, and 3d and 4th, and sometimes 4th and 5th lumbar spaces, or between all the joints of the small of the back, except the 1st and 2d.

In *tubercula* of the genital organs, pain is produced by pressure, between the 5th or last lumbar space, and the *os-coccyx*.

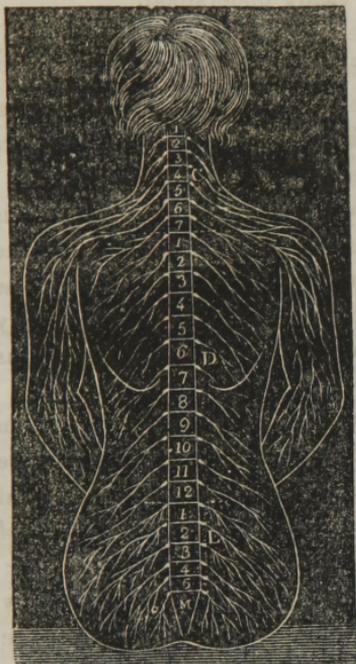
This pain, produced by pressure, is always more or less severe, in proportion to the severity of the disease. If there is but little disease, the pressure will produce but little pain; but if there is much disease, the pain will be severe.

The disease, in whatever organ it may be, is always either *active*, or *passive*, and if it is *active*, when such pressure is made, *this pain, on every repetition of the pressure, will dart into the diseased organ, with a force or violence, proportioned to the intensity of the disease.*

Press here, to find tubercula, or



Ganglions of the Spinal nerves in the intervertebral spaces.



There are 7 cervical vertebræ, C; 12 dorsal, D; and 5 lumbar, L; these vertebræ with the os-coccyx, m, constitute the spinal column. The spinal cord passes from the brain along the round cavity through the middle of the vertebræ, and the above ganglions are connected with it by the sympathetic nerves, which are also connected with the organs and muscles.

Acute and chronic tubercula, or inflammatory, and chronic diseases of the serous membranes, or serous surfaces of the body, organs, or limbs; including the skin and fascia of the muscles, is easily and *invariably* distinguished by pain more or less severe (in proportion to the intensity of the disease) produced by pressure on the ganglions of the spinal nerves, in the intervertebral spaces along each side of the spine, without any previous knowledge of the case—no matter what name may have been given to the disease by physicians, nosologists, or other medical writers.

We press on the *sides* of the 1, cervical vertebræ to find symptoms of tubercula of the head—cerebellum, of the brain, throat, nose, eyes, or ears.

Press on the *sides* of the 2, 3, 4, 5, 6, and 7 cervical, to find tubercula of the muscles, (Rheumatism) or the vertebræ, or of the joints of the limbs—white swellings, &c.

Press on the *sides* of the intervertebral space between the 7 cervical, and 1 dorsal, to find tubercula of the lungs, and

Press on the left side of the same space to find tubercula of the heart.

Press on the space between the 1 and 2 *dorsal* vertebræ to find tubercula of the stomach.

Press between the 2 and 3 *dorsal*, to find tubercula of the duodenum.

Press between the 3 and 4 *dorsal*, to find tubercula of the colon.

Press between the 4 and 5 *dorsal*, to find tubercula of the pancreas.

Press between the 6 and 7 *dorsal*, to find tubercula of the omentum.

Press on the right side of space between the 7 and 8 *dorsal*, to find tubercula of the liver, and on the left side, to find tubercula of the spleen.

Press between the 8 and 9 *dorsal*, to find tubercula of the diaphragm.

Press between the 9 and 10 *dorsal*, to find tubercula of the peritoneum.

Press on the spaces between the 11 and 12 *dorsal*, to find tubercula of the small intestines.

Press on the spaces between the 12 *dorsal* and first *lumbar*, to find tubercula of the kidneys.

Press on the spaces between the 1 and 4 *lumbar*, to find tubercula of the uterus, ovaria, prostate gland, vesiculæ seminales, and testes.

Press on the spaces between the 4 *lumbar* and os-coccyx, to find tubercula of vagina, &c.

These are the natural and scientific symptoms of the disease in its active and passive state in the organs—they are produced by natural causes, and are very plain, *invariable*, and easily understood.

When the disease has commenced in one organ or limb, it is frequently propagated from that to another organ or limb, as in the case of Mrs. J. P.—cases in which it is propagated from the tonsils and uvula to the lungs, and from the stomach to the lungs, and from the liver to the stomach, and from the uterus to the ankles, legs, and stomach, are very common.

In distinguishing the disease, and in tracing it in the different organs and limbs, I commenced and pursued the examinations as detailed in the cases appended to this work as I commonly do, without any previous knowledge of them. Any person of common education and capacity may easily distinguish the disease in the same way, in any of the organs or limbs.

In examining patients with chronic diseases, it should not be forgotten that the disease is sometimes in an active, but *most commonly* in a passive state. If the disease were constantly in an active state, patients would die with it in a few weeks, like those with acute diseases, instead of living as they do months, and sometimes years. We can always tell, in an instant, whether it is in an active or passive state, in the organs, by pressure in the proper places on the spine. If the disease is active, the pain produced by the pressure will dart into the diseased organ with a violence proportioned to the intensity of the disease, but if it is in a passive state, pressure produces pain in the spine only, which does not dart into the diseased organ as in its active state, but is more or less severe in proportion to the progress of the disease.

In many cases of the disease affecting the different organs, pain more or less severe is felt along the vertebræ, when none is felt in the diseased organ. We frequently find the same phenomenon in disease of the hip-joint, where the pain is in the knee instead of the hip.

Patients consequently refer the disease to the place where the pain is felt, and some physicians who have no more knowledge than they, agree with them, and apply their remedies to the same place. Large blisters have been applied to the knee, and cupping, blistering, setons, issues and the moxa to the spine in such cases without mercy during many months, and an enormous amount of suffering has been frequently endured in this way with little or no benefit to the patient.

Pain is also produced by pressure on the chronic enlargements or white swellings of the joints and limbs.

In these cases large tubercles, as well as smaller ones will be found on one or both sides of the neck or groin, and always on the same side with the disease.

CAUSE OF THE SYMPTOMS.

When, in the last stage of this disease, motion ceases in these organs, or death ensues, we find, on examination, that they are all enlarged, thickened or swollen, and their specific gravity much increased. On a further examination we find the primary lymphatic glands attached to the organs with the subsidiary glands in their substance, as also, those of the series along the side of the spine, with their satellites (connected with the organs through the spinal nerves) tuberculated.

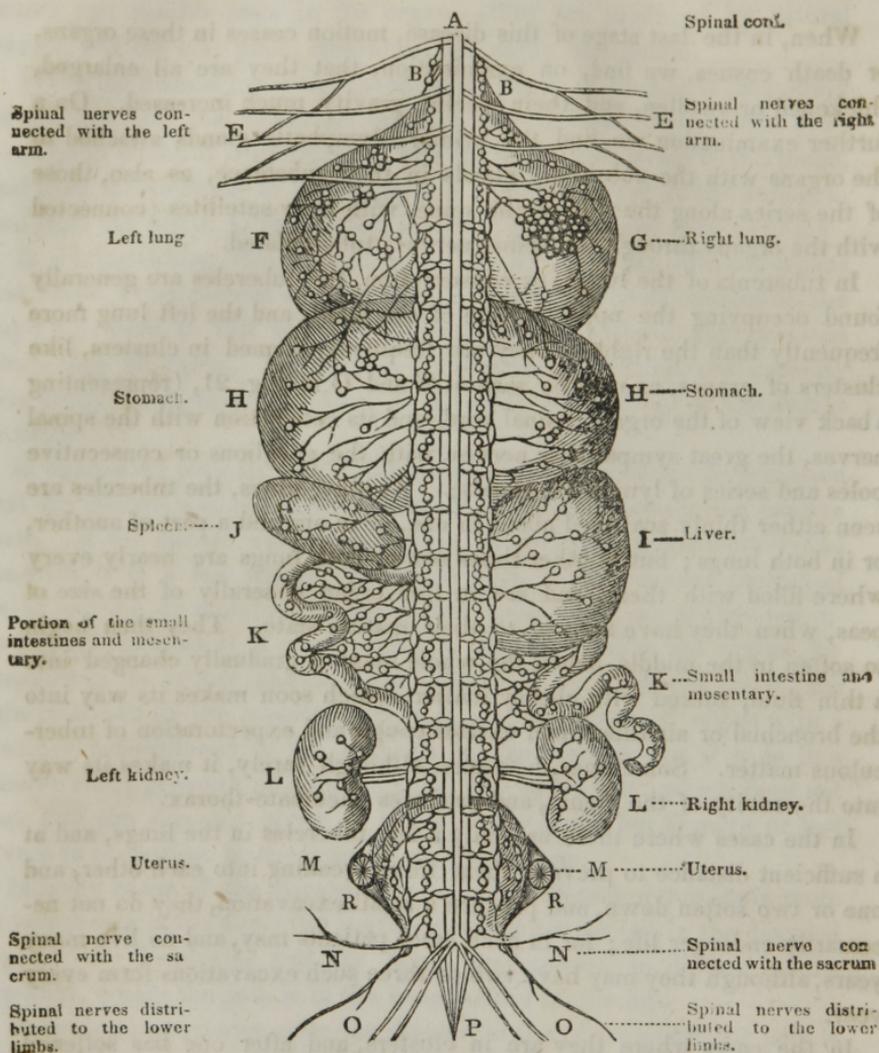
In tubercula of the lungs, or consumption, the tubercles are generally found occupying the upper portion of the lungs, and the left lung more frequently than the right. They are frequently formed in clusters, like clusters of grapes, as may be seen at F and G in Fig. 21, (representing a back view of the organs, spinal cord, and its connection with the spinal nerves, the great sympathetic nerves, with the ganglions or consecutive poles and series of lymphatic glands). At other times, the tubercles are seen either thinly scattered about in one, or in one and a part of another, or in both lungs; but at other times one or both lungs are nearly everywhere filled with them, and are in this organ generally of the size of peas, when they have arrived to their mature state. They then begin to soften in the middle, when the whole mass is gradually changed into a thin fluid, mixed with cheesy matter, which soon makes its way into the bronchial or air tubes, and excites cough and expectoration of tuberculous matter. Sometimes, however, although rarely, it makes its way into the cavity of the pleura, and produces pneumato-thorax.

In the cases where there are only a few tubercles in the lungs, and at a sufficient distance to prevent them from breaking into each other, and one or two soften down, and produce a small excavation, they do not necessarily endanger life; for in such cases patients may, and do live many years, although they may have two or three such excavations form every year.

In the cases where they are in clusters, and after one has softened down and produced a small excavation, others adjoining it soften down and break in to it, and in a few days or weeks, produce in this way excavations proportioned to the size of the clusters; and these may be from half an inch to two inches in diameter; and when the whole of one or both lungs are nearly everywhere crowded with tubercles in a mature state, a large excavation is generally formed, which might contain an orange.

Hæmoptysis or hemorrhage from the lungs, frequently accompanies consumption; and when blood is raised in small quantities, not much exceeding a wine glass full, it is generally exuded from the mucous mem

Fig. 21.



brane of the bronchia, in place of its ordinary excretions, and is commonly a slight affection requiring little or no attention; but when raised in larger quantities, it is almost always the consequence of the effusion of blood into the air cells; and is an affection which, from its exact resemblance to the effusion of blood in the brain, in apoplexy, is now called pulmonary apoplexy.

These glands, around which the blood has been effused, are larger than natural, and are in clusters, and occupy a circumscribed space, commonly from one to three inches in diameter, in the centre of which a clot of blood is sometimes found.

Young people who lead a sedentary life, and do not consequently give to all their muscles, or the connecting substance of the organs, that exercise which is necessary to health, are very subject to hemorrhage from the lungs. The muscles and connecting substance do not have their natural exercise, and consequently do not get their natural portion of nourishment from the secreting organs. They become soft and weak, while the secretions or nourishment which should have been absorbed by them, accumulate in the secreting organs, and distend them. The blood accumulates in the vessels around them, and bursts from the feeble barriers or connecting substance and muscles with which they are surrounded. The blood consequently either gushes from the lungs, when the patients generally linger a few months, or the heart or some of its large vessels give way, and they instantly sink never to rise again.

Hemorrhage from the lungs may also be produced by an aneurism breaking into the bronchia, or by the rupture of a blood vessel in an excavation; but these cases are very rare, and are quickly followed by death.

CHRONIC BRONCHITIS should not be confounded, as it frequently is, with tubercular consumption. It can always be distinguished from the latter disease by the absence of the symptoms we have given to distinguish it. Pressure on the space between the 7th and last cervical vertebrae, and first dorsal, produces no pain or effect whatever in chronic bronchitis, or pulmonary catarrh, as it is sometimes called, and dissections show it to be a chronic disease of the mucous glands of the membrane that lines the inside of the bronchial or air tubes of the lungs, which have no connection with the nerves of sensation.

The mucous membranes, therefore, have really no sensibility; and all their apparent sensibility is the consequence of the presence of the papillary lymphatic glands which rise from the serous membranes, conspicuously through them in some places, for the purposes of sensation, as in the tongue, nose, and genital organs.

In tubercula of the heart, its power or force is increased in the first stage of the disease, in consequence of the thickening and hardening of its walls, which either terminates in an effusion from its serous surface, and consequent dropsy of the chest, or in the last stage begins to soften down, become weak, till at length the blood bursts through its feeble barriers into the pericardium. In tubercula of the stomach H.H., called dyspepsia, the tubercles are generally small, and are found thinly scattered about in its membranes and in clusters, as seen in the figure, producing a thickening of the organ in patches of a size and number according with the dimensions of the clusters.

In tubercula of the liver i. the tubercles are sometimes in clusters,

and at other times only a few are found in it, as is frequently seen in the tuberculated livers of cattle and hogs.

Adhesions of the tuberculated portions of this organ are sometimes formed with the intestines, stomach, or peritoneum, through which tuberculous matter from its abscesses is discharged into the intestines, stomach, or on to the surface of the body.

In tubercula of the spleen J. and the kidneys L.L., the tuberculations are similar to those observed in the liver, and need not be repeated.

In tubercula of the intestines K.K., the disease is always found most intense in the small intestines, in consequence of their intimate connection with the mesenteric glands, involved in the same disease with their satellites in the membranes of these intestines at the same time. The tubercles are found more or less thinly scattered about in them, and in clusters, producing a thickening of these intestines in patches like those of the stomach, and at last terminate in ulceration.

In tubercula of the uterus M.M., called in its different stages amenorrhœa, leucorrhœa, menorrhagia, and chlorosis, the tubercles are in different cases found in different parts of it, sometimes in its body, at other times in its neck, and frequently in both, producing a thickening of its body, neck, and membranes, with an enlargement of a part or of the whole organ.

A suppression of the catamenia, more or less complete, or a mucous discharge from its mucous membrane, a muco-serous discharge from both the mucous and serous membranes, with prolapsus uteri, ulceration or hemorrhage are the uniform consequences of these tuberculations, involving either the whole or different parts of the structure.

In tubercula of the muscles, called in its first stage chronic rheumatism, the tubercles are generally found near the extremities of the muscles, or near the joints, and in its last stage in the fascia or membranes enclosing the muscles.

The swellings that arise over these tubercles, from the accumulation of their secretions in the lymphatic vessels, are soft and puffy, without discolouration of the skin, and are hence called white swellings, when affecting the limbs or joints of the limbs. They are, however, sometimes called by other names, when the disease appears along the joints of the spinal column, as King's evil in the neck, curvature and distortion of the spine, spinal disease, spinal irritation, nervous disease, and nervous irritation of the spine, showing most conclusively an entire want of knowledge of the true character of the disease.

These swellings terminate in ulceration or abscess, and generally discharge their tuberculous matter upon the surfaces of the joints or limbs. The bones, like every other part of the body, are formed with the round

elementary bodies, including the lymphatic and other glands, with their vessels and nerves, but have a solid instead of the soft and elastic connecting substance of the organs, membranes, muscles, and skin, for the purpose of covering and protecting some, and of supporting every part of the whole system. When the disease commences in them, it goes through its natural order as it does in the organs, membranes, muscles, and skin, of tuberculation, swelling, and ulceration or abscess. In its active state, in bones of very hard texture, the pain is sometimes very violent, and of the kind called spasmodic, in consequence of their slow and difficult expansion; but there is generally but little pain, with long intervals of ease; and when, in the course of the disease, the elementary organs of which the bones are formed, are destroyed by ulceration, the small excavations, once occupied by them, are very conspicuous, and the channels of their vessels and nerves easily traced.

CAUSE OF THE TUBERCULATIONS.

The frequent changes in the atmosphere, from the positive to the negative state, and its modification at the same time by heat and cold, is a common cause of tubercula of the organs and limbs; because these changes and modifications of the atmosphere produce corresponding changes in the positive and negative states of our bodies, and modifications of the secretions and excretions.

When the organs or limbs are tuberculated from this or any other cause, they are more or less sensible to pressure, because it contracts them; but when the pressure is removed they expand, and the pain ceases. So when the atmosphere is damp and cold, it is in a negative state, and the attractions and contractions are prevailing over the repulsions and expansions, and contract the tuberculated organs or limbs, when such patients have more pain, and feel more dull and heavy than they do when the atmosphere is clear and dry, and in a positive state. For when the atmosphere changes from the positive to the negative state, the body changes at the same time from the positive to the negative state. When attractions and contractions commence in the tuberculated organs and limbs, and produce dull or aching pains, which torture such patients more or less, until the atmosphere changes from the negative to the positive state, when the pains cease, and they arise from their cots, throw open the doors, and walk abroad with buoyant spirits.

Tuberculated organs and limbs are also not only concomitant of, but frequently the consequence of intermittent, yellow, bilious, and typhus fevers, diarrhœas and dysenteries, &c.

CHAPTER V.

Repulsive force expands, and the attractive force contracts—An organ or limb expands when its expansive force is prevailing over its attractive force—Nature reduces them by reversing this order—Two great divisions of matter—One of which repels and expands, and the other attracts and contracts—Alkalies and acids—Chlorine—Chlorides—Bitumen and iron—Absolute quantity of the magnetic forces in matter—Mr Faraday—Influence of magnetism on animals—Dr. Philip—*Directions* for using the magnetic remedies—*Observations* on them.

HAVING learned the symptoms by which we can with ease and certainty distinguish tubercula of the organs or limbs, and having also found the remote and proximate cause of these symptoms, we have surmounted the greatest difficulties we had to encounter, to effect the great object we had in view—that of saving from a premature grave a great number, every year, of the fairest and most talented portion of our race.

The object is therefore worthy of our greatest ambition, and we should pursue it with an ardor corresponding to its great importance.

Before undertaking to remedy disease, &c., it will be necessary for us to find the proper materials by which we may repair injuries to the human system as a machinist does to repair the injuries to a machine; and for this purpose, it will not only be necessary to refer to the laws of motion, but to the phenomena attendant on tubercular swellings of the organs and limbs.

We have seen in the illustrations of the laws of motion by which the body is governed, that repulsions expand and attractions contract. If then an organ or limb is increasing in size, it follows that the repulsive

and expansive force within the organ is prevailing over its attractive and contractive force. It also necessarily follows, that to reduce these swellings, it is important that the attractive and contractive force prevail over the repulsive and expansive force.

Nature frequently cures cases of this disease by a change in the action of these forces in this order. Thousands of cases of tubercular disease of the stomach, intestines, and liver, under the names of fevers, diarrhœas, and dysenteries, produced in the hot months, when the repulsive and expansive force in the atmosphere is prevailing over its attractive and contractive force, are cured in the cool months, when the attractive and contractive force of the atmosphere is prevailing over the repulsive and expansive force. When the hot weather commences, then those diseases begin to appear; and when the change of season gives to cool weather the ascendant, they begin to disappear, as is well known to the most common observers.

If we can now find means to counteract the force by which the organs and limbs are thus expanded, we shall not only be able to assist nature in repairing the injuries sustained during the progress of these expansions in the hot months, but we shall be able to repair the injuries in the cases in which these natural influences have failed. On an examination of the natural constitution of matter, we find there are two great divisions in the earth, one of which has a contractive, and the other an expansive force; or the contractive force of one, and the expansive force of the other, have a great preponderance over their opposite forces. We allude to the acids and the alkalies. The immense quantity of muriatic acid, and of soda, required to form the muriate of soda or common salt in the ocean and in the land, shows that these two kinds of matter are very generally diffused, and were first condensed with the water from the gases which probably constituted our globe in its primeval state. And as the muriatic acid, or the chlorine gas concentrated in the muriate of soda, forms the basis of the other acids, or a large proportion of the acids of our earth, so it is probable soda or a gas concentrated in it, forms the base of the greatest number of alkaline bodies. However this may be, we know that chlorine combined with other negative matter, has a strong power of contraction; and soda united with other positive matter, a strong power of expansion. We have familiar examples of the first in the case of acids, and of the last in the case of soaps. If, therefore, we can convey to the tuberculated organs and limbs, constantly and steadily, a harmless negative matter, in quantities sufficient to make the attractions and contractions in the organs and limbs prevail over the repulsions and expansions, we ought to be able to cure these diseases in their first stages as uniformly as they are produced.

Physicians have long been in the habit of prescribing chlorine for their

patients, combined with negative matter—with mercury, under the names of chloride of mercury, commonly called muriate or oxy-muriate of mercury, and sub-chloride of mercury or calomel, and with iron, commonly called muriate of iron.

They have also been sometimes in the habit of prescribing it in combination with gold, under the names of chloride and per-chloride of gold, and these combinations have been taken into the stomach, mixed with the chyle, attracted to the heart, and then repelled from it, through the arteries, to every part of the body, or to every part of every organ, limb, or other structure.

These, with Iodine, to which I have already referred, are the remedies principally relied on by physicians to cure or palliate this class of diseases. They are, however, differently selected, and they are prescribed in doses differing according to the diversities of medical opinion. The difference in the intervals of time, also, in which these remedies are directed to be taken, is very great; and the result of such practice is that which might very naturally be expected—an almost constant failure in curing the disease, and consequently an entire want of confidence in their efficacy.

We have, on the contrary, very successfully, during a period of more than twenty-five years, prescribed chlorine, united with gold and other negative matter, (by processes which it would be both tedious and useless to describe here,) in the form of a pill, in the same quantity and in the same intervals of time, in all conditions of patients affected with chronic diseases of this class **Note A.**

As the series of lymphatic glands or secreting organs along the spinal column, and their satellites around the vertebræ, with the spinal nerves are involved more or less in the disease of the organs with which they are connected,—I use, also, a plaster composed of bitumen and iron, placed on the spine, for the purpose of making the skin under it excrete a mucous or positive matter, instead of its natural aeriform or negative matter during the progress of the cure; and for the same reason, the plaster is also applied over the white swellings of any part of the body, joints or limbs. Large quantities of the magnetic forces are evolved in the process of the decomposition of these remedies in the organs, and on the surface of the skin, which increase the strength of the primary and consecutive poles situated within the organs—gradually reduce the tuberculated organs and limbs—remove the compression of the nerves and re-establish the natural action of the motive power of the system. **Note B.**

As a per-chloride of gold and soda is one of the principal articles that enter into the composition of the pills, we are pleased to be able to introduce here the following notice from a French periodical, of its effects

in the class of diseases in which we have so long used it, and to which our attention was directed by the kindness of a friend :

“ M. Legrand, to whom the profession is already indebted for a valuable work on the employment of salts of gold in the treatment of syphilis, has recently proposed in a memoir read before the Academy, apparently with much reason, the use of the same mineral in the cure of scrofula, when it affects the soft parts of the human frame, as the skin, the adipose and cellular tissue, certain parts of the mucous membranes, and particularly the lymphatic glands, both external and internal, and, in short, any texture not osseous or immediately connected with the osseous texture.

“ This agent, M. Legrand, exhibits, either externally by means of auferous frictions, or by dressing the sores with pure gold in the form of an impalpable powder mixed with lard ; or, internally, in the form of pills or pastilles, or rubbed on the mucous papillated surface of the tongue. In the first case, that of impalpable powder, one-sixtieth part, or about four or five grains of gold powder, are made into an ointment with half an ounce of lard. M. Legrand, however, thinks he has ascertained that it has not a medicinal action on the economy equal to that of the oxides or of the salts.

“ The forms of the mineral most strongly recommended are, the oxide of gold by potass ; the oxide of gold by tin, occasionally called the stannate of gold ; and, lastly, the per-chloride of gold and soda, more generally known under the name of the muriate of gold and soda, in the order now specified, the most energetic being placed last. These last preparations are indeed so active, that they cannot be administered in doses above 1-15th, 1-12th, or 1-10th of a grain ; and in large doses they would produce most serious disturbance in the economy.

“ These preparations, however, unlike antimony, arsenic, or mercury, are void of corrosive properties, and seem chiefly to excite the animal tissues to more salutary action ; and, according to M. Legrand, they are, when not sanative, not injurious. Hence their use may be much longer continued than those of the preparations of mercury or arsenic.”

M. Legrand is mistaken in supposing that the per-chloride of gold has a curative effect in disease of “ certain parts of the mucous membranes.” It has no effect whatever on the mucous glands, and no apparent effect upon any part of these membranes, nor has my combination of it, except in cases where the disease of the membrane is dependent on tubercular disease of the serous membrane to which it is united, and which disappears with the disease of the latter. He is also mistaken in supposing it has no sanative effect in osseous textures. It must be admitted, however, that it has very little, when used alone, compared to its action in the combination in which I use it.

The energy and efficiency with which these medicines must act, on the principles of magnetism, may be inferred from the following extract from Faraday's Researches on the "Absolute quantity of magnetism in matter."

"If two wires, one of platina and one of zinc, each one-eighteenth of an inch in diameter, placed five-sixteenths of an inch apart, and immersed to the depth of five-eighths of an inch in acid, consisting of one drop of oil of vitriol, and four ounces of distilled water, at a temperature of about 60 degrees Fahrenheit, and connected at the other extremities by a copper wire, eighteen feet long and one-eighteenth of an inch in thickness, yielded as much electricity (magnetism) in little more than three seconds of time, as a Leyden battery of fifteen equal jars of such a size that each contains one hundred and eighty-four square inches of glass, coated on both sides, independent of the bottoms, and charged by thirty turns of a very large and powerful plate electrical machine in full action. This quantity, though sufficient if passed at once through the head of a rat or cat, to have killed it as by a flash of lightning, was evolved by the mutual action of so small a portion of the zinc wire and water in contact with it, that the loss of weight sustained by either would be inappreciable by our most delicate instruments."

Mr. Faraday deduces from his experiments that the quantity of electricity belonging to a compound matter is identical with the quantity necessary to effect a separation into its elements. Hence may be inferred the enormous quantity of electricity contained in a single grain of water, from the quantity required for its decomposition. "It must be in quantity sufficient to sustain a platinum wire of an inch in thickness, red hot, in contact with the air, for three minutes and three-quarters." "I have endeavored," he says, "to make a comparison by the loss of weight of such a wire, in a given time, in such an acid, but the proportion is so high that I am almost afraid to mention it. It would appear that 800,000 such charges of the Leyden battery, as I have referred to, would be necessary to supply electricity sufficient to decompose a single grain of water; or, if I am right, to equal the quantity of electricity, which is naturally associated with the elements of that grain of water, endowing them with their natural chemical affinity."

The influence of magnetism on animals in augmenting the force of the contractions and expansions of the muscles, and in altering the morbid and establishing the natural secretion, has been proved by a great number of facts. The experiments of Dr. Philip are so well known to the medical and philosophical world, that it is almost an act of supererogation to repeat them; but as this little work is intended for all classes of readers, we deem it advisable to introduce an abstract of them. Dr. Philip "found that the secretion of the gastric juice in the stomach, which had been suspended

by the division of the 8th pair of nerves, was restored on establishing the voltaic current of electricity through the divided portion of the nerves next to the stomach. The accuracy of the experiment on which this conclusion is founded, was for a long time disputed; but it has been lately satisfactorily established, by their careful repetition at the Royal Institution by Dr. Philip, in conjunction with Mr. Brodie. Dr. Philip appears also to have succeeded in showing, that when the lungs and muscles are deprived of their proportion of the nervous influence, so that their functions are impeded, and the breathing has become difficult and laborious, increased facility is obtained in carrying on these movements by the stimulus of the galvanic power.

“It appears, then, from these facts, that the galvanic energy is capable of supplying the place of the nervous influence; so that, by means of its assistance, the stomach, otherwise inactive, digests its food as usual, and the muscular apparatus of the lungs are roused from a state of comparative torpor to one of healthy action.” Dr. Philip, indeed, contends “that the inferences deducible from these experiments establish the identity of galvanism, electricity, and nervous influence.”

Directions for using the remedies.

One pill must be taken night and morning, during three weeks, after which one pill every night; except in cases of children under three years and over one year and a half, when half of a pill only must be given every night on going to bed, until the disease is cured, no matter what the state of the stomach or intestines. In cases of children under a year and a half old and over three months, a quarter of a pill may be taken at bedtime in any convenient medium.

For children, the pill may be dissolved in water at the rate of four tea spoonsful of water to one pill, if care is taken to shake the solution well before using it.

Privation in dieting is neither necessary nor proper during the use of these pills; but on the contrary the most nourishing food must be taken in all cases where the stomach will bear it, and it will always be borne after a few days use of the pills.

Patients must not only take the most nourishing food, but must take any kind the appetite craves; that is when they have eat all they can of one kind of food, they may take what they can of another, and then of another, &c.

As soon as the swellings begin to lessen in the organs or limbs, the latter are flaccid and weak, and want support; they must get it from food.

Directions for using the Plaster in cases where the disease is affecting the organs, as in consumption, dyspepsia, &c.

In tubercula, or what is called scrofula or chronic disease, affecting the head or face, the plaster must be applied to the middle and upper part of the back of the neck or upper cervical vertebræ—in consumption, and also in chronic disease or hypertrophy of the heart, it must be applied over the lower half of the neck and extend down between the shoulders over the first, second, and third joints of the back, or dorsal vertebræ,—in dyspepsia it must be applied over the first, second, third, fourth, fifth and sixth joints of the back between the shoulders, or from the large and last joint of the neck to the seventh dorsal vertebræ—in chronic disease of the liver it must be applied over the seventh, eighth and ninth dorsal vertebræ—in chronic disease of the spleen it must be applied over the same vertebræ—in chronic disease of the intestines and mesentery or chronic diarrhœa, it must be applied over the eleventh and twelfth dorsal, and first and second lumbar vertebræ—in the uterus or chronic disease of this organ or leucorrhœa, chlorosis or menorrhagia, it must be applied over all the joints of the small of the back or lumbar vertebræ. In such cases, the leather or cloth for the plaster may be cut five inches wide, and spread *very* thin three inches wide, leaving a margin on the sides and ends of about an inch, and must be renewed by adding a little more of the plaster, as often as the plaster becomes loose and does not adhere. If the plaster is renewed very often, or oftener than once in two or three days, and spread thick, it will in some cases make the back very sore; and in such cases, it may be discontinued two or three days, or until the pimples it produces are healed, and then re-applied as before, and its use continued until the disease is cured.

As the disease very frequently affects more than one organ at the same time, as the stomach and liver, or the lungs, stomach and liver, the plaster should in such cases be placed over all the joints through which the spinal nerves are connected with the diseased organs.

In the cases in which the disease of the organs is not very severe, the pills alone will be sufficient to cure it without the aid of the plaster, and in the bad cases that would require two or three boxes of the pills, the plaster may generally be discontinued after the use of one or two boxes.

Directions for using the Plaster in white swellings of the limbs, jaw and neck, and in ulcers and abscesses.

The plaster must be spread *very* thin (it is no matter how thin) on India rubber cloth, which is much better than any other, or thick oiled silk, or the rough side of a piece of oil cloth, or on very thin and soft

reather, or on glazed cotton or linen cloth, and of a size sufficient to cover the tubercles, ulcers, abscesses, or white swellings, or painful part of the system, and applied to them and removed and renewed once in every day, either by adding a very little more of the plaster, and what will be barely sufficient to give it a new surface, or by spreading a new plaster.

If, on removing the plaster, much of it should adhere to the skin, it may be washed off with soap, and the plaster re-applied, and this course must be pursued until the tubercles, ulcers, and abscesses or white swellings are removed. Small vesicles appear under the plaster in a few days after it is applied filled with lymph, but they soon disappear, and others are formed and disappear, and require no attention whatever.

Observations on the use of the remedies in different cases.

When white swellings of the joints or limbs, over which these plasters are applied, are cured, they are always smaller than the corresponding well joints or limbs, unless from long continued disease the bones of a joint or limb have, before its application, become permanently enlarged.

There are 120 pills in a box, a number sufficient, with a box of plaster, to last a patient 14 to 17 weeks, and to cure any of the recent cases of the disease in any of its forms. In cases, however, of long continuance, or in the last stage, it will sometimes, from obvious causes, which I have not room here to explain, require two or three boxes of each.

These remedies, which I have used in my practice for more than twenty-five years, and during the time I have been investigating the phenomena of tubercula, and about which there is no mistake, are very active, but never produce any injurious or disagreeable effect upon the stomach, or any other part of the system, or any other that is noticed by such patients, except a steady improvement in all the symptoms dependent on chronic tubercula.*

Improvement in health commences immediately, or very soon after the commencement of the use of the remedies, and their action continues steadily and forcibly, and cannot be easily diverted from their purpose, and the cure progresses steadily, with a steady increase of strength and flesh, unless it be checked by colds which sometimes retard, but rarely, or never, prevent a cure.

These remedies cure all the different forms of tuberculæ in their first stages, and a great majority of those in the last stage of the disease, known by the symptoms we have described, but called by different names according to their situation or other circumstances attending them, viz., scrofulous sore eyes, and ulcers of the cornea—ulcers of the ears—

disease of the antrum and nose—tinea capitis or scald head—king's evil and goitre in the neck—mercurial disease or chronic enlargement of the tongue and tonsils—chronic enlargement of the breast, or mammæ, including cancer in its first stage—phthisis or consumption—hypertrophy of, or chronic enlargement of the heart—dyspepsia, or chronic disease of the stomach—chronic disease of the liver, or liver complaint—tabes mesenterica, or chronic diarrhœa—chronic disease of the uterus, or leucorrhœa, amenorrhœa, chlorosis, menorrhagia, and incipient cancer of the uterus—ulcerated legs, fever sores—disease of the spine, disease of the hip joint—white swellings of the joints or limbs—morbid alterations of structure in the synovial membranes—chronic rheumatism (tuberculated muscles) or cases where one of these forms of the disease is complicated with the same disease in another organ or limb.

In typhus fevers the secreting organs or lymphatic glands of the small intestines with those of the mesentery, as well as the series along the spine, are always tuberculated, and dissections in such cases always show those of the small intestines and mesentery in a state of ulceration. Dissections also show that other organs are tuberculated at the same time, as the brain and its membranes, stomach, liver, &c.; and pressure along the spinal column shows that such patients have the symptoms of tuberculated organs. And these symptoms are, whenever they are present, the evident indications that these remedies are the true ones, no matter by what names systematic nosologists or other medical writers may have chosen to call the disease. In diseases which have been confounded by nosologists with tubercula, but which from the absence of these symptoms, as well as from the evidences of post mortem examinations, have manifestly no connexion with them, as in chronic bronchitis and other affections of the bronchial tubes, &c., these remedies are entirely useless.

The liver and spleen are frequently found to be enlarged during and after intermittent fevers; and we always find these symptoms in these fevers after the first or inflammatory stage is past, and we frequently find by these symptoms that the stomach or some other organ is tuberculated at the same time. We also find these symptoms in remittent or bilious fevers after the first or inflammatory stage; and when such patients do not begin to gain health and strength after that stage is past, it is almost always in consequence of the ulcerated state of the small intestines, (as is now well known to physicians) when these will be found to be the appropriate remedies. They have saved many such patients, as well as those with typhus fever, when in the last part of the last stage of the disease, after the common remedies had entirely failed.

Scarlet fever is acute tubercular disease of the serous surface of the muco-serous membrane of the throat, which is extended to other serous

surfaces, as those of the stomach, lungs, skin and other organs. It goes through its acute or inflammatory stage in four or five days, when it becomes chronic, and demands the use of these remedies to reduce the tuberculations, remove the great and extensive compressions of the nerves, and re-establish the natural action of the forces which produce motion in the system. When, therefore, such patients do not begin to recover soon after the acute stage is passed, no time should be lost in the application of these remedies.

The yearly number of cases in which we used these remedies was at first very few, but they gradually increased with the improvements in the remedies suggested by long experience, when in 1835, or from the 1st January, 1835, to December 31st of the same year, they amounted to 163. I took notes of these cases in which the disease, affecting the different organs and limbs, was in the proportion seen in the following schedule:—

Neck.....	18
Neck and eyes.....	2
Neck, nose, and spine.....	1
Neck, tongue, tonsils, and right leg.....	1
Neck, jaw, tonsils, ear, cerebellum, breast, heart, stomach, uterus, one arm and both legs.....	1
Neck and lung.....	2
Neck and stomach.....	1
Neck and mesentery.....	3
Tongue, tonsils, and uvula.....	1
Tongue, tonsils, and right leg.....	1
Nose and face.....	2
Lungs, (first stage).....	21
Lungs, last stage with tubercles in a mature state.....	1
Lungs, with excavations.....	5
Lungs and both legs, and one ankle, with excavation of both lungs.....	1
Heart.....	3
Heart and liver.....	4
Stomach.....	19
Liver.....	5
Stomach and lungs.....	18
Kidney (left).....	1
Liver and kidney (right).....	1
Liver and stomach.....	4
Liver with abscess.....	3

	Brought forward,	119
Mesentery		1
Uterus and legs		3
Uterus and lungs.....		2
Uterus and stomach.....		6
Joints and limbs		31
Unknown		1

Whole number of cases in 1835, 163

Of these cases the number cured is.....154

Cases not cured, in consequence of not using the remedies
a sufficient length of time..... 3

Of the cases which have died, the first was that of Master N., of Columbus, aged 16 or 17 years, whom I never saw, and of whose case I know nothing, except that it was about ten years since it commenced.

The second case was that of Mrs. B., of M., in the last part of the last stage of tubercula of the mesentery, with a frightful marasmus.

The third case was that of Mrs. K., of M., with a cancer of the uterus in a state of ulceration, complicated with abscess of the liver, which was discharging matter through the right side in four places.

The fourth case was that of Mr. W. W., of M. Michigan, with tuberculated right leg, left hand, heart, and scalp over the right frontal, and right parietal bones. The leg and also the scalp ulcerated in two places. He died of compression of the brain, in consequence of the injudicious use of nitrate of silver, which had been frequently applied by the direction of his physicians, to the upper part of the parietal bone, and penetrated through it to the brain, as shown by dissection.

The fifth case was that of Mrs. S., of Cincinnati, with tuberculated left lung in a mature state; and sixth, the case of Mrs. C., of Cincinnati, with hypertrophy of the heart, and excavation of both lungs.

We have taken but a few notes of the numerous cases in which we have used these remedies since 1835; but from all we have learned of the result of them, we are induced to believe that the proportion between those that have been cured by these remedies, and those in which they have failed, does not vary much from that shown in the above year, or from those of former years.

We are familiar with the use of the stethoscope, having used it in a great number of cases since 1824, and cannot be mistaken in regard to the excavations in the lungs mentioned in the above cases, which show results in the use of these remedies as a cure for tubercular disease entirely unknown to any other course of treatment. They also show the importance of commencing the use of these remedies in the early stage

of the disease in this organ, and the uncertainty of the results when in the last stage.

The cases of this disease affecting the neck, called king's evil, are all cured with these remedies, excepting only those which have terminated in cancer, and which are easily distinguished by physicians—first by the solidity of the tumor, with the close adherence and dark color of the skin, and lastly by its fungus ulcers with granulated surfaces and everted edges of the skin. The symptoms which I have so often mentioned, also enable us to distinguish tubercula from cancer of the mammæ or breast, in which these remedies, like every other, fail. All the other cases of tubercula, particularly white swellings of the body, joints, or limbs, yield readily under the use of these remedies, including those in a state of ulceration.

The cases of the disease in the stomach called dyspepsia, are generally cured with the greatest rapidity, probably in consequence of the great quantity of the magnetic forces evolved in the decomposition of the pills in that organ.

When the small intestines are tuberculated, the habit is costive in the first stage of the disease; but when in the last stage, the tubercles become ulcerated, the habit is changed, and diarrhœa commences. In either case these remedies uniformly (with very few exceptions) re-establish the natural habit in from three to fifteen days. There are a few cases of long standing that require a longer time to effect the same object, and there are cases in the last stage of consumption uncontrolled by these or any other remedies.

In the cases of costive habits, medicine should be taken once a day on commencing the use of these remedies, in quantities sufficient only to move the bowels every day, and the dose gradually lessened until it is no longer required.

In amenorrhœa, leucorrhœa, and menorrhagia, the uterus is always tuberculated, or more or less enlarged, and these enlargements of this organ are uniformly reduced by these remedies in the first stage of the disease, and a great proportion of those in the last stage, and the natural action of this organ is thereby re-established. These effects of the remedies are so constant and uniform, in such cases, as to require no aid from other remedies, excepting only such as are accompanied with displacement of the uterus, and called prolapsus-uteri.

When this organ is enlarged, its weight is increased, and the ligaments by which it is suspended dilate, and it descends more or less from its natural position, and in many cases so far as to require mechanical support during the progress of the cure.

When, therefore, there is so much displacement of this organ as to produce much inconvenience in walking, it should be supported in its

natural situation by some of the numerous contrivances invented for that purpose, until the tuberculations are reduced, and its ligaments contracted to sustain it again in its proper position.

The blood is magnetised, and a florid color imparted to it, by the forces evolved in the decomposition of the air in the lungs, and the same florid color is imparted to dark blood drawn from the arm, by conducting into it a stream of these forces.

In closing these observations it may, therefore, be useful to observe, that when blood is drawn from the veins of patients affected with chronic diseases, it is always of a very dark color, which imparts a dark, sallow, or unnatural color to the skin, both of which are uniformly found to be changed after one or two weeks use of the magnetic pills, to the light, florid, or natural color, and is no doubt the consequence of a chemical and healthy change in the character of the fluid, produced by magnetising it with the forces evolved in the decomposition of the pills.

The importance of such a change in the color, and healthy state of the blood, is very great, and any physician may satisfy himself that it is thus changed, by drawing blood from the arm, as I have frequently done, immediately before, and a few weeks after the commencement of the use of the remedies.

New-York, March, 10th. 1843

It has always been a leading object with me to increase the power of these remedies to the greatest degree compatible with perfect safety, for obvious reasons, and I have now to announce the fact that I have succeeded beyond my expectations, in increasing the power of the pills so much as to cure the disease in more than three-fourths of the cases, without the use of the plaster, and in less time than they formerly did with it.

I also introduced, about a year since, the use of a substitute for the plaster, in many cases, (mostly, those of females) in the form of a wash, which fully answers the purpose. This article is in the state of a salt, which is dissolved in spirits, and the skin, for five or six inches in width, along the spine, barely wetted with it, once or twice a day, (morning and evening) according to the greater or less tenderness of the spine, in tubercular diseases of the organs, and this will be found to possess all the advantages without any of the inconveniences of the plaster, and the use of it in this manner, perfectly safe under any circumstances.

This salt is put up in boxes and should be dissolved in a quart of spirits, and the solution kept corked in a bottle and in a dark place, and used with a small swab, which may remain in the solution, with the upper part of its handle thrust into or through the cork.

In the cases of white swellings and scrofulous ulcers, the skin over them should be merely wetted with this solution, once or twice a day, (morning and evening) in proportion to the extent of the disease, and the violence of the symptoms.

The frequent calls for these pills to be forwarded through the Post Office to the different States of the Union, has induced me to put them up in neat flat tin boxes, in which form they will hereafter be forwarded per order to any part of the United States, as well as the composition for the wash, put up in the same manner; and both for the same price at which the pills and plaster have always been sold. The postage will, in every case, be paid here, so that the expense of the remedies with this pamphlet to those who use them, will be the same in every part of the United States, as it is to those who purchase them in this city.

CHAPTER VI

Tubercula of the left lung, stomach, and liver—Of the right lung—Of right lung, heart, stomach, liver, spleen, kidneys, spine, intestines, and uterus—Of lungs—Of lungs and uterus—Of the lungs with excavations—Of the lungs and neck—Of the right lung, with a large cluster of tubercles—Dr. Lawson's letter—Tubercula of stomach, heart, and eyes—Of the eyes—Of the antrum—Nose—Cerebrum and uterus—Stomach and uterus—Intestines and mesentery—Liver and stomach—Correspondence—Tubercula of the uterus, liver, stomach, and tonsils—Extract—Tubercula of the tongue, right tonsil, right leg, and right side of the neck—Lip—uterus.

TUBERCULA OF THE LUNGS.

Consumption.

MR. G. W. B., of the city of New York, of light complexion and thin habit, aged 29 years, commenced the use of these remedies for consumption in April, 1839, they being prescribed by another physician, from whom, as well as from Mr. G. W. B., I obtained the following concise history of the case :

The disease commenced in August, 1833, with hemorrhage from the lungs, which was succeeded by cough and moderate expectoration, which continued to August, 1834, when the hemorrhage from the lungs was repeated. The cough and expectoration continued ; and in August, 1835, the hemorrhage was again repeated, and his strength much reduced. The quantity of blood raised each time being from half a pint to a pint. The cough and expectoration gradually increased after this last attack of

NOTE H.—A great change has recently been made all over Europe, in the practice of physicians, in regard to diet in *chronic diseases*. Instead of confining such patients to a low vegetable diet as formerly, they now proscribe vegetables, and direct a full meat diet ; and this change of practice is represented every where as having the most salutary effect up on their patients

hemorrhage up to the time he commenced the use of the remedies, when he was pale, feeble, and much emaciated. His cough and expectoration then began to decrease; the color of his skin soon began to assume a more florid hue; his appetite increased, so that he soon gained strength and flesh; and when he had taken three boxes of the remedies, or in about six months, his health was fully re-established, and it continues very good to this time.

TUBERCULA OF THE LEFT LUNG.

Mr. R. H., of the city of New York, aged 30 years, had been out of health five years when he called to see me in June, 1837. On an examination of his case in the usual manner, I found him affected with tubercular disease of the lungs, stomach, and liver. The disease commenced first in the liver, and in about a year after was propagated to the stomach, and from thence to the lungs. This was about four months before he called on me, when cough and expectoration had commenced, which still continued. He was pale, feeble, and emaciated. Prescribed magnetic remedies. His health soon began to improve, but progressed at first slowly; yet, when he had used four boxes of these remedies, his health was entirely restored. He has since enjoyed as good health as any man.

TUBERCULA OF THE LUNGS.

Rapid Consumption

Mrs. D. R., of the city of New York, of light complexion, aged 19 years, commenced coughing early in the fall of 1838, while in a state of gestation. This cough continued with little expectoration until after her confinement on the 23d of February, 1839, when they both began to increase, and in a few weeks the expectoration amounted to about a pint a day. Her feet and ankles began to swell, accompanied with other symptoms of approaching dissolution, when she commenced the use of the magnetic remedies under the advice of another physician, on the 4th of April following.

These remedies checked the further progress of the disease, and in 48 hours after she commenced the use of them, her symptoms were evidently better; her cough and expectoration gradually decreased; the swelling of her feet and ankles disappeared; her appetite and strength increased; and in about two months after she commenced the use of the remedies, and after she had used one box of them, she called with her husband at my office to inquire whether it would be necessary to use

them any longer. I advised her to use another box ; she did so, and has since enjoyed uninterrupted good health.

NEW YORK, *June 15, 1840*

I recognise, in the above description, fully the case of my wife.

SELAS REYNOLDS.

TUBERCULA OF THE RIGHT LUNG, HEART, STOMACH, LIVER, SPLEEN,
KIDNEYS, SPINE, INTESTINES AND UTERUS.

Mrs. P., of the City of New York, of light complexion, and small and slender frame. I was called to see her on the 20th May, 1837, and on examining her spine, found she had tubercula of the right lung, heart, stomach, liver, spleen, kidneys, intestines and uterus. On inquiry I found that she was married at the age of 15 years, and had suffered two abortions. The disease commenced about two years before in the uterus, with leucorrhœa, and was thence first propagated to the stomach, and thence to the liver, spleen, heart, kidneys, and at last to the right lung. In January of the above year, cough and expectoration commenced, and had continued to that time. The whole length of the spine was very sensitive to the touch, and she could consequently bear but very little pressure upon it. On her observing that there was some swelling along her back, I examined it, and found a white swelling along each side of the spine, extending from the sixth dorsal to the third lumbar vertebræ. As this was an extraordinary case of tubercular disease, involving so many organs, as well as the vertebræ at the same time, I requested the liberty of inviting several distinguished physicians to see it before I commenced the use of the remedies. This request being granted, I invited four of them to see it ; all of whom agreed, after an examination of the case, that it was hopeless of cure under the use of the common remedies. I then commenced the use of the magnetic remedies—the plaster to extend the whole length of the spine. Her health began to improve soon after. About the first of July, her cough and expectoration had increased during a few days, and on an examination of the chest with the stethoscope, I found an excavation in the upper part of the right lung, showing that a cluster of tubercles had softened down and made their way into the air tubes, and left an excavation since I first examined her lungs.

Her health soon after began to improve again—the white swellings of the vertebræ disappeared ; and in about seven weeks the excavation was healed and entirely closed, and her cough and expectoration also disappeared in a few months after. The other tuberculated organs were gradually reduced to the natural state ; and soon after the state of gestation was renewed, and continued through the natural period.

TUBERCULA OF THE LUNGS.

Rapid Consumption.

Mrs. P. S., of S., Hamilton county, Ohio, aged twenty-eight years. I was called to see her, September 16th, 1833. She had hectic fever, with cough, expectoration, night sweats, and diarrhœa. On applying the stethoscope to the chest, it gave the symptoms of tubercular engorgement of the left lung. These symptoms came on about three weeks before, and two weeks after her confinement with her last child. She had irregular pains in the left side of the chest for three months previous to her confinement, and was unable to sleep on her right side, as an attempt to do so increased the painful sensations in her left side. On examination, I found a number of tubercles on the left side of her neck, from the size of a pea to that of a large bean, and one on the side of the lower jaw of the same side, of the size of a small walnut. Two physicians had prescribed for her, but she continued to get worse, and her flesh and strength were wasting rapidly. Prescribed—magnetic pills and plaster. These alarming symptoms were checked in a few hours, her health soon began to improve, and in three weeks her cough, fever, night sweats, and diarrhœa had disappeared, and in another week her health was re-established. This was a case of rapid consumption, and she would not have survived under the common treatment more than *one or two weeks* longer.

TUBERCULA OF THE LUNGS.

Consumption.

Mrs. M. W——, of Union, Butler county, Ohio, aged 34 years. I was called to see her, August 22, 1834. She is above the middle stature, of dark complexion and slender form. Has enjoyed almost uninterrupted good health until about the first of June last, when she began to be feeble, and this feebleness continued, and in the last week in July began to cough, and in a few days after began to expectorate a thin and semi-transparent glutinous matter, and it was not until yesterday morning that the appearance of this matter changed to a yellow-white colour, and raised in a much larger quantity than usual, which now gave alarm for her safety and induced her to seek assistance. Her cough too had been attended with some degree of hoarseness after a few of the first days, and had increased so much that it was now with great difficulty that she could raise her voice above a whisper. Her flesh is wasting rapidly, and in the last few days has had a little fever, in the afternoon and evening, with a flush on her cheeks, and has begun to sweat in the after part of the night.

The catamenia has disappeared, and her eye has the clear and glassy appearance and expression which gives to her countenance that peculiar vivacity so characteristic of consumption. She has a tubercle of the size of a pea on the upper and outer side of the left lower jaw, and another of twice the size on the lower part of the neck, and near the clavicle of the right side, and both are very sore or tender. Pressure on the lower cervical vertebræ produces pain, which darts thence into the chest, and pressure on the tubercle near the clavicle produces pain which darts under the clavicle.

Prescribed, pills and plaster. The plaster 12 inches long and five broad, to be applied over the last cervical and upper dorsal vertebræ. One pill to be taken night and morning for three weeks, and then one every night, with the constant use of flannel chemise and drawers, and to continue her usual exercise and exposure to the atmosphere.

Her cough and hoarseness soon began to subside, and in about four weeks they had very nearly ceased, and she had gained considerable strength, when she took a severe cold, which increased her cough and hoarseness, and lessened her strength, but they began to subside again in a few days and soon disappeared.

October 28th. Examined her chest again with the stethoscope and found that the respiratory murmur, which at first was only heard very slightly in the lower part, and only in a few places in the upper part of the lungs, was now clear and distinct over their whole extent, but yet not so loud as in health.

November 14th. The tubercles which were at first nearly round and hard, have flattened down and nearly disappeared. The respiration is now loud and natural over the whole extent of both lungs. She has no cough, unless she gets a little cold, and then it is very slight, and no more than common, when enjoying good health, and has entirely lost the consumptive aspect of her countenance, and has nearly regained her usual flesh and strength.

December 15th. The catamenia has re-appeared after an absence of four months, and her health in all respects perfectly restored.

Her mother and two sisters have died with consumption.

Oct. 22, 1836. Her health continues good.

TUBERCULA AND EXCAVATION OF BOTH LUNGS.

Consumption.

Mrs. J. C., of Union, Butler county, Ohio, aged 36 years. Called to see her, May 28th, 1835.

She has been very subject to cough ten or eleven years, and has had five or six slight attacks of hœmoptysis during the last two years, and in

the last part of March last, her cough and expectoration, after two or three successive colds, was much increased, and has continued to increase to this time. She has irregular fever and night sweats, and has had diarrhœa, which gradually disappeared after her feet and legs began to swell. They are now swelled nearly to the knee, and are œdematous, and she is much emaciated.

Pressure on the right side of the last cervical vertebræ produces pain, which, on every repetition of the pressure, darts into the right lung, and pressure on the left side of the same vertebræ produces pain, which darts into the left lung.

On applying the stethoscope to the chest, I found an excavation in the upper and front part of the left lung, and another near the middle of it, and a third in the front and upper part of the right lung. These excavations are not very large, and there are no tubercles in clusters in a mature state near them, or in any other part of the lungs.

Diagnosis. Tubercula and excavation of both lungs. Prescribed, magnetic pills and plaster. The action of these remedies commenced immediately, and in about four weeks her cough, fever, and expectoration had entirely disappeared, and the excavations were healed, and she had gained much flesh and strength. She has now, (July 4th,) no appearance of disease, excepting the swelling of her feet and legs, and this has almost all disappeared. *November 4th, 1836.* Her health continues good.

TUBERCULA OF THE NECK AND LUNGS.

King's Evil terminating in Consumption.

Mrs. L. B——, of Franklin, Warren county, Ohio, aged 35 years, came to me, August 16th 1832, with the form of scrofula called king's evil, which had been propagated to the lungs, and terminated in tubercular consumption.

The whole of the right side of her neck was covered with scars and ulcers, and they extended from thence down half the length of the shoulder blade, and half the length of the arm. There were sixteen ulcers discharging scrofulous matter, and a number of tubercles of different sizes, on her neck, arm and shoulder. She had hectic fever every day, with night sweats, and was coughing and raising large quantities of matter every day, and such as is raised in tubercular consumption. She was feeble and much emaciated. It was now more than six years since the disease commenced, and the tubercles began to suppurate; and more than five months since she began to cough and expectorate. On examining her chest with the stethoscope, it gave the symptoms of tubercular engorgement of the right lung. Prescribed the magnetic pills and plaster. In seven weeks from this time, she came to me again

apparently cured. The ulcers were all healed—only one small tubercle remained, and that much lessened in size. Her fever and night sweats had disappeared, and her cough and expectoration had almost entirely ceased, and she had gained so much flesh and strength as to make her appear as well as any other person. Her health has continued good. Previous to her applying the magnetic remedies, physicians and doctors of all sorts had visited her; and her friends did not expect her to survive more than a few months.

TUBERCULA OF THE RIGHT LUNG.

Consumption.

Doctor B. S. Lawson, of Cincinnati, rather light complexion, tall and slender frame, aged 32 years. Called to see him about the last of October, 1836. His health, he informed me, had been gradually declining about eight years, and about the middle of August last, he began to cough and expectorate very freely. On examining his neck, found the submaxillary, and some of the cervical glands tuberculated; and on applying pressure on the last cervical vertebræ, it produced pain, but it was more severe when applied on the right side, between this vertebræ and the first dorsal, while pressure on the other vertebræ of the spine produced no pain or effect whatever.

I now applied the stethoscope to the right side of the chest, and soon found in the middle portion of it, a space of about three inches in diameter, where the respiration was entirely inaudible, indicating from the absence of the crepitous and mucous rattle, a large and solid cluster of tubercles, rendering this part of the lung impermeable and immoveable. The respiration was natural all round this portion of the lung, and in every other part of the chest.

Diagnosis. Tubercula of the middle portion of the right lung. He now told me that a celebrated physician, who was attending him, had also examined him with the stethoscope, and with the same result. He also told me that percussion had been frequently applied, which uniformly gave a dull sound over that part of the lung. He has the usual pale, lean, and haggard look, or consumptive aspect of the countenance; and the emaciation has made considerable progress; and he is gradually sinking. He has had prescribed for him, and has pursued the usual antiphlogistic treatment, including a large emetic tartar plaster over the front portion of his right lung, (from which he suffered severely,) with low vegetable and milk diet.

Prescribed, magnetic pills and plaster, with no restriction in diet. He commenced gaining strength in a few days after, and in about seven weeks, or at the time he had finished taking one box of the pills, I examined him again with the stethoscope, when the respiration was as

audible, in the before-mentioned middle portion of the right lung, as in every other part of the chest, but presented now very clearly in this place, the sounds of bronchophony. His cough had now nearly abated, and he had gained in this time so much flesh, as to make him appear better than he does in his usual health; and has lost entirely the pale, haggard, and consumptive aspect of his countenance.

January 18, 1837. Examined his chest again. The sound of bronchophony in the circumscribed space in the middle portion of the right lung, and his cough and expectoration have ceased, and percussion gives now a full, clear sound.

He continues to gain flesh and strength, and his face, body, and limbs, have now the full and rounded form of a person in full flesh, and the most perfect health.

It will be seen, that after distinguishing consumption by the new symptoms, the chest is, in most cases, explored with the stethoscope. This is done to ascertain the order and state of the tuberculations; for, although they are detected in the first dawning of the disease—even in many cases before the cough commences—yet we cannot tell, without the aid of auscultation, whether these tubercles are scattered about at a distance from each other, or are adjoining each other in small or large clusters, like clusters of grapes, or have softened down and produced a small reparable or a large irreparable excavation. Hence the doubt that must exist in regard to the curability of the disease in its last stages in this organ, by the natural remedies, without the aid of auscultation, and hence its importance in this, as well as in many other diseases of the chest; yet very few know any thing of its advantages, in consequence of a deplorable defect in the education of physicians.

“It may be useful for me to add to the above history of my case, that besides the most perfect restoration of my health, (for such I believe to be my happy fortune, as far as I can judge,) that the above remedies have been a great benefit to me in another point of view. My physician, and other gentlemen of the profession, aware of the great danger hanging over me, advised me to change my location for a more southerly one, as affording the only hope, not of a restoration of my health, but of prolonging my feeble existence; and beyond all doubt it was the best prescription in their power to make. Now, I do candidly believe, that my case was incurable under the common mode of practice, and that the most judicious practice known to the profession was pursued by him to whom I submitted my case. According to the above advice, I determined to remove to the south, and had commenced preparation by selling off a part of my property, when I was, by the kindness of a friend, (a physician, too,) directed to Dr. Sherwood and his remedies—for which I consider myself under eternal obligation to the Merciful Disposer of all good.

“I do believe that every case of incipient tubercular consumption may be radically cured by a use of the above remedies; and I feel it my duty to submit my case, with these few remarks, to the public, from the fact that thousands are carried to an untimely

grave, in spite of the most scientific practice of the schools—that would, in my opinion, have been, with all certainty, saved by a use of the *electro magnetic remedies*.

B. S. LAWSON, M. D.

From the Cincinnati Whig.

Doctor Sherwood's Magnetic Remedies.

The following correspondence has been handed to us for publication, in the belief that it will interest as well as benefit the community. Doctor Lawson, who testifies to the value and efficacy of Dr. Sherwood's remedies, is a regular graduate of the Ohio Medical College, and a physician of good standing. We have, ourself, made trial of the remedies, and think we derived essential benefit from them.

For the Daily Whig.

CINCINNATI, January 23, 1839.

Dr. LAWSON.—SIR: Having been informed that you have, during the last year past, prescribed in your practice Dr. Sherwood's Electro Magnetic Remedies in upwards of fifty cases, all of which were CHRONIC DISEASES, including scrofula, with great success, I take the liberty of making the inquiry of you, whether my informant was justified in making such a report from your own admission of the facts.

If you confirm this report, I should consider it a duty we owe to the cause of humanity to give it publicity as much as possible, and if false, we should disabuse the public mind of the imposition.

Dr. S. also challenges investigation as to the electro galvanic symptoms. Please inform me if you, in your practice, detect diseases by his method of examination

Respectfully,

B. W.

DEAR SIR: Your communication of the 23d instant was duly received, and an answer should more promptly have been given but for the want of a leisure hour, and a doubt resting on my mind in regard to the propriety of noticing anonymous letters.

Nothing, now, so much influences me to accede to your wish as a conviction of the importance of the facts which you wish to elicit from me, and thereby to diffuse them more generally through society.

I have a perfect detestation of every thing that has been presented to the world in the form of what has been generally denominated "quack medicines," and on this account I have always felt a delicacy in appending my name, or giving my influence to any thing which may justly be "dubbed" with such an appellation.

In the case of Sherwood's remedies, I am somewhat relieved from this difficulty, from two considerations: first, from the stubborn fact that, in my own person, I derived the most decided beneficial effects from their use, and at a time when all other means were pronounced as incompetent to a cure; and, in the second place, from being myself pretty well acquainted with the composition of the "remedies."

These two facts will serve as an apology for me, in candidly expressing my opinion with regard to the medicine. If I did not believe that thousands were suffering from diseases, incurable under any other system of practice, and certainly curable under this, I would not dare to offer one word in favor of Sherwood's remedies. From a conviction of this kind, I hesitate not, for one moment, to recommend them as infinitely superior, in chronic diseases, to any other course at present known to the medical profession.

I did use upwards of fifty boxes during the last year, and generally with success. I am, however, of the opinion, that in advanced stages of pulmonary consumption, they

are not so effectual as one would be led to suppose from reading Dr. Sherwood's pamphlet.

In almost every other form of scrofula, they have surpassed my most sanguine expectations. There are many citizens of Cincinnati who will certify to cures, in certain cases of long standing, which were not benefitted from any course which had been pursued, (and in these cases you know every thing is tried that is heard of,) and their certificates will be of sufficient variety, too, to prove all that is claimed for them, even by Dr. S. himself, with the single exception which I have made above.

I do not wish to be understood to convey the idea that they are infallible; that is not my meaning, nor impression, concerning any thing on this earth; but I do believe them to be as effectual in curing chronic diseases as ordinary remedies are in curing the ordinary diseases of our climate. I must be understood to have in view, in such a declaration as this, the exception which was made, and again referred to.

With regard to the symptoms, I believe that they cannot be gainsayed. I can detect, with the greatest certainty, the diseases called by Dr. Sherwood scrofula, without any previous knowledge of the patient, or of the history of his disease; and this I do merely by an examination of the cervical glands and spinal column.

The ordinary course of feeling the pulse, looking at the tongue, and asking a hundred questions, more or less, is both useless, and a waste of time. I do not think that one skilled in this mode of examination can be deceived once in a hundred cases. In my practice, I pursue this mode of examination exclusively, with a great saving of time, and a much more satisfactory result. This is as much as I deem it now necessary to communicate.

Yours, &c.

To B. W

B. S. LAWSON

I had no knowledge of the above communication of Dr. Lawson, until two or three months after its publication; and as there are now many physicians, both in this city and in the different States of the Union, who are practising the new symptoms and prescribing the magnetic remedies, I have introduced it here to show the opinion entertained of them by other physicians, who have tested the certainty of the one, and the efficacy of the other.

In the advanced stages of consumption mentioned, we have constantly stated the uncertainty of the results, and urged the necessity of commencing their use in the first stage of the disease, when cases like that of Dr. Lawson are uniformly cured by them; and as the disease can now be easily distinguished, in the first stage as well as the last, there is now no longer any excuse for delaying their use until the patient is in the last stage, when the result must necessarily be uncertain.

In regard to the Doctor's allusion to secrecy I would remark, that in the course I have pursued to defray the expense of the investigation and cure of this class of diseases, through a long series of years, physicians have no just cause of complaint: for I tell them what the remedies are; explain the principles of their action, and give them the evidence of their efficacy.

There is, however, a cause constantly operating to prevent many phy-

sicians from prescribing them in their practice, and that is a self-interest, which, with them, is paramount to every other; for they constantly prefer making up a bill against a patient of from fifty to five hundred dollars, with the old empirical and useless remedies, to a fee of as many cents for a bare prescription; and the tenacity with which they hang on to the *valuable* cases is truly astonishing to the uninitiated, as they uniformly prefer to see them sink into their graves, than saved from it by another physician.

TUBERCULA OF THE STOMACH AND LIVER.

Dyspepsia and chronic disease of the liver.

Mr. J. B., of the city of New York, aged 28 years, called to consult me in August, 1837. He had dyspepsia and chronic disease of the liver, with which he had been affected about two years and a half. He had a sallow countenance, and was much emaciated.

Prescribed magnetic remedies. His health speedily began to improve, the sallowness of his countenance disappeared; and in about four months his health was fully restored, and has continued good to this time.

TUBERCULA OF THE STOMACH, HEART, AND EYES.

Dyspepsia, enlargement of the heart, and scrofulous sore eyes.

Mr. H. B. C., of the city of New York, aged 25 years, called to consult me in May, 1837. He had been out of health about ten years, was much emaciated, and was suffering severely with dyspepsia, hypertrophy of the heart, and scrofulous sore eyes.

The disease of the stomach commenced, in 1828, with the usual symptoms of dyspepsia, which had continued with varying severity. In 1831, he began to feel a hard beating of the heart, and, in 1834, the disease commenced in both eyes. He had consulted and been under the care of a number of distinguished physicians, without having received any material benefit. Prescribed magnetic remedies. His health commenced improving immediately, and in about six months was entirely restored, and continues good to this time.

NEW YORK, JUNE 12, 1840.

I have read the above concise history of my case, and am pleased to have an opportunity to add my testimony to the value of the above-mentioned remedies, for I had given up all hopes of being cured long before I was induced to try them.

H. B. COWLES, 198 Broadway.

TUBERCULA OF THE EYES.

Scrofulous sore eyes.

Miss M. Wilkinson, of Syracuse, N. Y., aged 3 years. She had scrofulous sore eyes, with ulcers of the cornea. The disease commenced in 1836, when she was about a year and a half old. It gradually grew worse, and she became blind in about eight months from the time it commenced, and continued so until the spring of 1838, when she commenced the use of the magnetic remedies. In two weeks after she began to see, and in three weeks could see very well, when the shade she had worn a year and a half was removed from her eyes. I saw her in July of the same year, when her eyes were entirely well, and she enjoying fine health.

Her father is wealthy, well educated, and intelligent, and obtained the attendance and advice of the best physicians in the case; but the disease continued to make progress until it was arrested by these remedies.

TUBERCULA OF THE ANTRUM, NOSE, STOMACH, UTERUS, AND CEREBRUM

Disease of the antrum, nose, dyspepsia, and leucorrhœa.

Mrs. J. C——, of S——, Hamilton county, Ohio, light complexion, middling stature and habit, aged 34 years. Called to see her, March 6th, 1833. She has severe pain in the cavity under the cheek bone, from which tuberculous matter issues into the left nostril, and the septum (division) of the nose is perforated at a point opposite to the place where the matter issues, and is also with the nose painful, and a little tumefied. The disease commenced with pain in the antrum, more than two years since, and after it had continued a few weeks, began to discharge a thin and sometimes bloody matter, which gave her much relief for a few weeks, when the discharge ceased, and the pain returned with its accustomed violence, and has pursued the same course to this time.

The pain, after the discharge ceases, is spasmodic, and a few months since extended to the left and front portion of the brain, and about two weeks since commenced in the scalp.

Having no time to spare for further inquiry, I commenced the examination of the spine; and first, with the first cervical vertebræ, and pressed hard with the fingers on a number of small tubercles on the left side, which produced severe pain, and which darted with such violence into the head, scalp, and antrum, as to prevent her from allowing me on any account to repeat the pressure; and I passed to the dorsal vertebræ, pressure on the third and fourth produced pain, which darted into the

stomach; and pressure on the second, third, and fourth lumbar vertebræ, produced pain, which darted into the uterus.

I now described to her symptoms of dyspepsia and leucorrhœa, which had been affecting her more than a year. Note D.

The pain in her head is confined entirely to the front and left portion, and never passes the longitudinal sinus. A number of physicians and steam doctors have attended and prescribed for her, during a period of more than two years, but the disease continued to get worse.

Diagnosis. Tubercula of the left antrum, nose, left and front portion of cerebrum, left side of the scalp, and of the stomach and uterus.

Prescribed magnetic pills and plaster. Her health soon began to improve; and in seven weeks the antrum and nose were healed, and her health in all respects restored, and she had gained nearly her usual flesh and strength.

TUBERCULA OF STOMACH AND UTERUS.

Dyspepsia and Leucorrhœa.

Miss M. D——, of dark complexion, and naturally full habit, called on me May 28, 1833, with the usual symptoms of dyspepsia and leucorrhœa. The disease commenced about a year ago with leucorrhœa, and it soon extended to the stomach; she has no vomitings, but distress, and sometimes pain in the stomach, and at others in the right or left side of the lower part of the chest, or between the shoulders, with palpitations, and accompanied more or less with pain or weakness in the small of the back. She says she has lost considerable flesh, and is feeble and unable to labor, as an attempt to do so, or to walk up a hill, or up stairs, produces or increases the palpitations, when she feels faint, and is soon out of breath.

Pressure on the 2d, 3d, and 4th dorsal vertebræ, produces pain, which darts into the stomach; and pressure on the 3d, 4th, and 5th lumbar vertebræ, produces pain, which darts violently into the region of the uterus.

Diagnosis. Tubercula of the stomach and uterus. Prescribed magnetic pills and plaster. Her health soon began to improve, and in six weeks was fully restored.

TUBERCULA OF THE INTESTINES AND MESENTERY.

Tabes Mesenterica and Diarrhœa.

Master M. G. M., of Cincinnati, aged three years. I called to see him, August 25th, 1834. He has an enlargement of the abdomen and diarrhœa.

The disease commenced when he was three or four weeks old, and has continued to this time. His limbs are very slender, and his muscles soft and flaccid, and his joints appear very large proportioned to the size of his limbs. He has five or six tubercles on each side of his neck, some of them very large. Two or three physicians have attended and prescribed for him at different times without any apparent benefit.

Diagnosis. Chronic tubercula of the intestines and mesentery. Prescribed magnetic pills and plaster.

The diarrhœ disappeared in a few days, and the enlargement of the abdomen, with the tubercles, began gradually to subside, and in seven or eight weeks they disappeared, and he had gained considerable flesh and strength, and had no appearance of disease, and his health continues good

TUBERCULA OF THE LIVER AND STOMACH.

Mr. W. H., merchant, of Louisville, Ky., aged 29 years, came up to me, April—, 1836, and informed me that he had been out of health a number of years; when I told him, as I generally do patients with chronic diseases, that it was all I wanted to hear about his case, as I would try to ascertain myself what his disease was, and where it was affecting him. He was pale, and on his removing his coat and vest, saw he was much emaciated. Pressure along the cervical vertebræ did not hurt him, but moderate pressure on the 2d dorsal produced severe pain, which darted into the stomach with such violence, as to produce excessive faintness for nearly half an hour. Pressure on the right side of the 7th and 8th, and 8th and 9th dorsal, produced severe pain, which darted into the liver. Pressure on the other vertebræ, below these, produced no pain or effect whatever.

Diagnosis. Tubercula of the liver and stomach. The disease, Mr. H. now informed me, commenced in the liver about five years ago, and about three years since extended to the stomach. He has consulted a number of physicians, east and west of the mountains, and has taken a great variety of remedies recommended by them, besides a great variety of nostrums, including Swaim's Panacea, but has been gradually growing worse, and so much so, that during the last year, he has not been able to take any food upon his stomach, excepting dry toast, without butter, and cocoa.

Prescribed, magnetic pills and plaster, and told him, as I commonly do, that he *must* commence getting well immediately, and that in about three days his stomach would bear, and that he must commence eating any kind of food that his appetite craved, and that in one week he might eat as much as it craved; and that in ten or twelve weeks, his health,

flesh, and strength would be re-established. I did not see Mr. H. again until November 6th, when I found him enjoying fine health.

TUBERCULA OF THE LIVER AND EYES.

Mr. J. H. Esq., of L., Ohio, aged 34 years, called for advice, May 12, 1835. On examining the spine, I commenced between the first joint of the neck and scull, and pressed in the spaces between the joints below, one after another, and it produced no pain until I had descended to the space on the right side, between the 7th and 8th dorsal, when pressure between these, and between the 8th and 9th produced pain, which on every repetition of the pressure, darted into the liver. Pressure along the joints below these, produced no pain or effect whatever. On inquiring into the history of this case, I found the disease commenced in the liver, about six years ago, and has terminated in abscess, and broke and discharged through the intestines, four different times during this period. He is now feeble, and just recovering from the formation and discharge of the last one, which had reduced him nearly to death, and from which he and his physicians had but little hope of his recovery.

Mr. H. brought with him his son, aged three years, with hereditary scrofulous sore eyes. The eye-lids of both eyes are very much swollen and inflamed, and the inflammation extended over both eye-balls which had two ulcers of the cornea. The light was so painful to the eyes, as to render it necessary for him to hold a handkerchief almost constantly over them. The ganglia, or line of glands on both sides of his neck, with the submaxillary under the jaws, were very much enlarged and painful under pressure. The disease commenced more than two years since, and he has, since that time, been subjected to thorough courses of treatment, with the most popular remedies, without any apparent benefit.

The magnetic remedies were prescribed, and were effectual remedies in both of these cases.

The following correspondence on the subject of the efficacy of my remedies in chronic diseases, (of which I had no knowledge at the time it took place) has been handed to me for publication.

LOUISVILLE, July 12, 1838.

Mr. W. Foulke,

SIR: Your favor of the 25th ult. was received and handed to Mr. Wm. Hanna, of this city, who said he would most cheerfully make a statement of the effect of Dr. Sherwood's medicine in his case, if by doing so he could relieve one person from a disease under which he had suffered so much. His statement is on the preceding page, and is but one out of many cases that have come under my observation, with a similar result.

Very respectfully,

DAVID HOBBS.

LOUISVILLE, July, 1838.

Mr. W. Foulke,

DEAR SIR: Mr. Hobbs having placed in my hand a letter from you, asking the opinion of persons in this city who have used Dr. Sherwood's pills and plaster, as also a statement of their individual case, I, as one of them, beg leave to state that about seven years since I was afflicted with what was called dyspepsia—my affliction consisted in almost constant pain in the bowels, stomach, side, back and head, the former so much so, that after eating, it was excruciating. For the first three years, I was under the treatment of the most eminent physicians in Baltimore, Philadelphia, and this city, without the least relief, and by all of them pronounced incurable. I then resorted to all the nostrums to be had, but with similar result.

On my return from the east, in the Spring of 1836, I was induced by my friend Mr. Hobbs, (who offered to accompany me) to visit Dr. Sherwood, at Hamilton, Ohio, who, on our arrival, proceeded to examine me, (according to the manner directed in several pamphlets since published) but my case was so bad, that he considered the operation might prove fatal if he continued; and consequently he felt doubtful of effecting the cure of so bad a subject. I, however, determined whilst there was a hope, to continue every medicine that offered, and at once commenced with the pills and plaster, which, after the third day, gave me great relief; and before I had finished two boxes became as well, and have continued so as I ever was during my life. I had lived for two years entirely on bread and tea. I was the first in this city that ever took the pills; but from the knowledge of my situation and cure, hundreds of others have since been relieved. For a more particular statement of my case I refer you to Dr. Sherwood's pamphlet, page —.

Respectfully, dear sir, your obedient servant,

WILLIAM HANNA

CINCINNATI, July 9th, 1838.

Mr. W. Foulke,

DEAR SIR: Your letter of the 25th June reached me in due course of mail, and in answer I can only say in regard to Sherwood's electro-magnetic remedies, or pills and plaster, that my youngest daughter was severely afflicted with scrofula, and for several months I availed myself of the best medical skill our city afforded, and all without success. Indeed, the disease continued to increase, and the eruption extended from her body into her face, nose, ears, and eyes, until we were obliged to keep her confined to a dark room, and almost despaired of her restoration. In this situation I was induced to make the experiment, and try the pills and plaster, the result of which was, in a few weeks, my child began to improve, and continued to improve until she was entirely restored, leaving nothing but some of the scars caused by the disease. She is now in fine health, and no indication of scrofula, and I have no doubt it is an effectual remedy for that distressing disease.

In regard to the application of it to myself I cannot speak in so strong terms. For several months I have had a severe cough, and my lungs considerably affected. I tried this medicine only so far as to take one box of the pills. I also travelled into the country, and my health is much improved, but the travel, exercise, and change of air was, doubtless, of great service to me; and in my own case, I know not how far I ought to attribute efficacy to the medicine. I shall be in your city some weeks—expect to reach there about 25th inst.—and if you should wish to see me, by calling on Mr. G. W. Richards, merchant, on Front street, he can inform you where I will be found.

Respectfully, yours,

WILLIAM McLEAN

CINCINNATI, July 2, 1838.

Mr. W. Foulke,

DEAR SIR: Your favor of the 25th is at hand. Agreeable to your request, I give a short history of my wife's case, and the result.

She had been afflicted for 8 years, and had become a confirmed dyspeptic—so much so, that she had not eaten a meal of victuals for 2 years, of any kind, without distressing her, and was seldom able to go out much. At this stage of the disease, and after exhausting all resources of medical skill, (I had concluded that travelling for her health was the only chance for her recovery). She earnestly solicited me to procure her a box of Sherwood's pills and plaster. I endeavored to persuade her, that they were like all other similar medicines, having no faith in them myself. But still she could not be persuaded to abandon the idea of trying them, as she had heard of several of her friends who had received benefit from them. After some month's delay, I purchased a box of them merely to gratify her. But, contrary to my expectations, she soon began to improve, and in 6 or 8 weeks could partake of any kind of food with the rest of the family, and from that time to this (18 months) has been free from any appearance of a return of the disease. She has used about two boxes.

Yours, Respectfully,

E. WHIPPLE

CINCINNATI, July 3, 1838.

Mr. W. Foulke,

DEAR SIR: In a line received this day, you request me to give you the history of my wife's case, in connexion with the application and effect of Sherwood's electro-magnetic remedies. I take pleasure in answering your inquiries, so far as my limited knowledge of the progress of disease and the effect of medicine will permit.

My wife is 19 years of age, of a very frail and delicate constitution. Prior to, or about the first of January last, she had enjoyed good health. About that time (perhaps a little before) she commenced declining, indigestion, and want of appetite, together with extreme weakness, indicated the approach of more serious disease. A few weeks passed, and she commenced coughing—her cough was of a dry, husky character, at first unaccompanied with expectoration. I was under serious apprehension that the consumption which had cut down, prematurely, her father and mother, and many other members of the family, had marked her for its victim, and commenced its work. At first, I resorted to some of the celebrated remedies for diseases of this kind (among which were the "Watasia," and the "Vegetable Pulmonary Balsam,") but all to no purpose.

Her cough increased daily, attended with profuse expectoration, and she was rapidly wasting away.

About six weeks after her cough commenced, I was induced to try Sherwood's remedies, confident that the ordinary practice of the physicians would only facilitate her departure, at the same time, doubting the efficacy of these remedies.

The day after she had taken the first pill, she had an unusual appetite for food, and I thought her cough during the night had not been so constant or severe. In three or four days, her cough and expectoration ceased, (the blue pill was abandoned) the tone of her stomach was restored, her strength increased, and she could partake of the strongest diet, without injury or inconvenience. From that time to the present, her health (with the exception of occasional colds) has been good.

She has taken a part of two boxes. Whether the relief which they have afforded is temporary or not, time only can determine. I feel thankful to the Giver of all good, that I was directed to the use of these remedies.

From this, and some other cases which have come within my own observation, I have no hesitation in recommending them to all who may be afflicted with scrofulous diseases, by whatever name they may be called.

I would, at least, say, try them.

Your's, &c.,

SAMUEL F. CARY.

Mr. Foulke, to whom the above letters were addressed, resides in Philadelphia—had been out of health many years, and a long time under the treatment of the *elite* of our art in that city, when he commenced the above correspondence (as I am informed) to ascertain what would probably be the effect of the remedies in his case. I am also informed that Mr. Foulke used the remedies, and that their effect in his case, fully justified the character given them by his correspondents.

TUBERCULA OF THE UTERUS, LIVER, STOMACH, TONSILS, PALATE, AND CEREBELLUM.

Mrs. T. S——, of F., Butler Co., Ohio, aged 31 years. She came to see me, August 14, 1836, and said she had been out of health about 5 years. The examination in her case was commenced as usual, by an examination of the spine, and first, of the first cervical vertebræ.

Pressure on a small tubercle of the right side of it produced severe pain, which darted into the right side of the throat, and right side of the head. Pressure on the left side of it produced pain which darted into the left side of her throat. Pressure on the sides of the second joint also produced pain, which darted into the upper and front part of the neck. Pressure on the second, third, fourth and fifth dorsal, produced severe pain, which darted into the stomach. Pressure on the right side of the seventh, eighth and ninth, produced severe pain also, which darted into the region of the liver. Pressure on the third and fourth lumbar was painful. Pressure on the other cervical, dorsal and lumber vertebræ, produced no pain or effect whatever.

I now examined the line of glands along the neck, and under the jaws, and found them very much enlarged, and told her that her tonsils and palate were enlarged, and that she had dyspepsia, chronic inflammation of the liver, and leucorrhœa, besides swellings of some of her limbs.

She said that was right, and that the disease originated in the uterus five years before, and about a year after, it commenced in her liver, and in a few months after that, in her stomach; and that it was now nearly three months since her ankles and legs began to swell. It is now a year since her catamenia disappeared, and they have not since returned. On

examining her throat, I found the tonsils and palate very much enlarged, and the tongue one-third larger than natural. The tonsils were very sensible to pressure, and had, with the palate and rest of the throat, a dark red colour, and during the last few weeks the act of deglutition, or of swallowing solid food, had been difficult and painful. She had had more or less pain in the right side of her head with dizziness, during the last few months. She was also very pale, feeble and emaciated. A number of physicians have attended her one after another, for a long time, but the disease continued to make progress, and after years of suffering, which can only be appreciated by persons of her sex, she was in the last part of the last stage of disease, and death, under the common treatment, would soon have closed the scene. Prescribed, pills and plaster. One plaster to be applied over the first, second, and third joints of the neck and of a length sufficient to extend from ear to ear. One 5 inches wide and 16 inches long, to extend from the 6th joint of the neck, to the 10th dorsal; and another over all the lumbar vertebræ, and also to use the pills according to the directions in the pamphlet.

I told her, as I commonly do, that she *must* commence getting well immediately, and that in from three days to a week, she would notice it distinctly, and would in that time be able to eat any kind of food, with a good appetite, and without any disturbance of the stomach; and that in from eight to ten weeks she would be entirely well.

I never saw or heard of this patient, or her husband, before she called on me at the above date, and never saw or heard of her again until October 24, when in passing near her residence, I called to see her. Her husband, on my inquiring after her health, before I went into the house, told me, he "believed she was about well." On making the same inquiry of her, she told me she "believed she was entirely well;" and on my asking her if there was no mistake about it, she told me: "no, she thought there could be none," and asked me to "observe the difference in the colour of her skin, and the flesh she had gained;" and then presented to me one arm, to see how hard or solid the flesh was. She also observed, "that her catamenia had returned, and that she had been twice, since she saw me, as regular in that way, as she ever was;" and besides, "that she commenced work as usual when she was well, about two weeks since, and had in that time done a great deal of work, which did not appear to injure her."

I told her that it all looked very fair, but that the change appeared so very great in so short a time, that I would like to examine her back, and see if there was no mistake about it. She told me I might as much as I had a mind to, for she "thought it was perfectly sound." I accordingly examined it in the usual way, and found she was right.

It will be observed that in describing the cases, and the effects of these

remedies, I have generally been very brief, but have said more of this case in consequence of its great importance to females; for the disease generally commences in them at an adult age, in the uterus, as it did in this case, and then, after a few months or years, is extended to other organs and limbs.

The above case is not an uncommon one, for the day previous to the one on which I prescribed for this case, I was called to prescribe for another.

Mrs. W. F., of the town of R., aged 21 years, affected in all respects as in the above case, except that the tonsils and tubercles in the upper part of the neck were much larger. After, however, the common remedies had entirely failed in her case, she was induced to try the effects of travelling, and visited some of the principal eastern cities—got the advice of some of the physicians of those cities, and on her return, her husband came to me, and told me that “he wanted me to call and see her, as he had become satisfied that she must die, unless I could save her.” I accordingly visited her, and commenced and went through with the examination of the spine in the same way, as in the case of Mrs. S., and then described to her the disease in the different organs and limbs, and prescribed the same remedies. I then, as in the case of Mrs. S., told her she must commence getting well immediately, and the cure would continue steadily, unless it was retarded by colds, and that she must be well in ten or twelve weeks.

She did accordingly begin to get well as I had told her. I called once in two or three weeks to see her progress, and the last time, the day after I called on Mrs. S., and found her situation, in all respects like Mrs. S.—’s, except that her tonsils and the tubercles under the jaws, although greatly reduced, had not entirely disappeared—and she was directed to continue the use of the remedies. Dec. 4. The tubercles, I have learnt from her mother, have disappeared, and her health is entirely restored.

Mrs. A. H., of Louisville, Ky., aged 21 years. She, like the above cases, had the disease affecting the liver, stomach, and uterus, and a few months since, her throat. She, like Mrs. W. F., after the use of a great variety of remedies, recommended by her physicians, went to one of the eastern cities. She, however, returned a few months after, and gradually growing worse, was in a few weeks confined to her bed. The disease continued to make progress, and in a few weeks more a number of physicians were called in consultation, but her symptoms continued to grow worse.

Magnetic pills and plaster were now prescribed. She began to get well immediately after, and in a few days was able to sit up and walk her room, and in two weeks was promenading the streets. It is now (Nov. 8th, 1836,) only five weeks since she commenced the use of these remedies, and although the usual time has not elapsed to perfect a cure, she has gained so much flesh and strength, as to make her appear to a stranger, as well, and in as good spirits, as any other person. Yet she is rather thin or slender, and has not regained her natural fleshiness, and pressure on the 1st and 2d cervical, 2d, 3d, 4th, and 5th, and 7th, 8th, and 9th dorsal, and 3d and 4th lumbar vertebræ, produced pain. Continued the remedies.

December 16th. Her face has now the full and rounded form, and she has fully regained her natural flesh. On applying pressure now, on each of the vertebræ, along the whole line of the spinal column, it produced no pain or effect whatever. Her health is now in all respects fully re-established, and I directed the remedies to be discontinued.

TUBERCULA OF THE STOMACH.

Dyspepsia.

The following scrap was cut from the *Cincinnati Whig*:—

GENTLEMEN: I noticed some time since, a communication, published in the *Cincinnati Whig*, signed by Dr. Lawson, in which he speaks with great confidence and certainty, of the good effects of "Sherwood's Remedies," as prescribed by him in his practice, in the cure of various forms of scrofula.

It gives me pleasure to add my own conviction of their efficacy in the cure of dyspepsia. For many years, this disease had preyed upon my constitution, and in the summer of 1836, and winter of 1837, my digestive organs had become so much impaired, that almost every kind of food, taken as nourishment, created the most intense suffering. My flesh had wasted away, and my whole system had become so much debilitated, as scarcely to give me strength sufficient to leave my room. I had become discouraged, and despaired of ever again regaining my health, and looked upon death as the only sure relief of my sufferings. Many of my friends and acquaintances, with the knowledge that my disease seemed to baffle the skill of several eminent physicians, had despaired of my recovery, and had made up their minds that I must soon be numbered among the dead.

At this stage of the disease, I was advised by some one to make trial of "Sherwood's electro-magnetic remedies." As a last resort, I was willing to lay hold of any thing that would relieve me, and lost no time in procuring a box, and commenced their use. In the course of a few weeks, I found my strength gradually to increase, and my food (such as my appetite craved) no longer gave me distress. My former

power of spirits again returned, my slumbers became sound, and undisturbed by horrid dreams, and my constitution, in a short time, became restored to its former flesh, health, and vigor. It is now more than two years (1839) since I recovered my health, and have withheld giving publicity to my case, until I could, without the fear of contraction, speak of the permanency of the cure. I would advise, especially, all dyspeptics to lose no time in procuring these remedies, and to give them a fair trial. I am very confident they will not have cause to regret having done so. If any person, afflicted with this disease, should wish for further information than herein given, if they will call on me, or address me by letter, post paid, if in my power, I will cheerfully give it. I have no interest, directly or indirectly, in the sale of the medicine.

Your's, respectfully,

CINCINNATI, JUNE 5, 1839.

C. TOBEY.

TUBERCULA OF THE TONSILS, PALATE AND TONGUE.

Master W. W., of Union, Butler Co., Ohio, light complexion, aged 17 years, called for advice, Nov. 25, 1835, and said he had been out of health some time. I now, without any enquiries, commenced an examination of the spine, between the first cervical vertebræ and skull, when he observed that it hurt him, and the pain darted into his tongue. I then pressed on the left side, in the space between the first and second vertebræ; when he observed again that it hurt him, and the pain darted into his throat. Pressure along the other joints of the neck and back, produced no pain or effect whatever.

I now told him that his tongue and tonsils were swelled, and that he had a cough and expectoration; and in looking into his mouth, found both tonsils (almonds of the ear) much enlarged, and in a state of ulceration,—the uvula [palate] much enlarged and elongated, and the tongue twice its natural thickness. On examining the submaxillary and cervical ganglia of glands under the jaws, and in the sides of the neck, they were found much enlarged. He is pale, and the emaciation is making progress. The disease commenced more than a year since, and he has been coughing and expectorating matter, more or less, during the last eight or nine months.

Prescribed, the magnetic remedies. The swelling of the throat and tongue soon began to subside, and in about six weeks the ulcers were healed, and his health was entirely restored in about five months from the time he commenced the use of the remedies.

The above was a very bad case of a disease to which clergymen are very subject, and which would have terminated fatally without the use of these remedies. I have prescribed them in many cases of this affection during the last three years, nine of which were those of clergymen

Five of these are cured. Two were induced to stop the use of these remedies after two or three weeks, and substitute others, one of whom is dead. The other is, or was, travelling for his health, the last I heard of him. Two very bad cases are now under treatment, and are both very nearly well.*

TUBERCULA OF THE TONGUE, RIGHT TONSIL, RIGHT LEG, AND RIGHT SIDE OF THE NECK.

Mr. G. A. F——, merchant, of Cleveland, Ohio, light complexion and slender frame, aged 34. His tongue began to swell, and to be sore and stiff or clumsy, in February, 1833; and in April following, his right leg began to swell. The swelling and soreness of the tongue continued to increase until the middle of May, when the leg had become very painful, and began to discharge tuberculous matter.

The swelling and soreness of the tongue began now to subside, and in a few days disappeared. The leg continued to grow worse, and confined him to the house much of the time for nearly four months; but after the use of a variety of applications, it healed about the first of December, of the same year, when he discovered a tubercle of the size of a chesnut in the centre and near the roots of the tongue, which about the last part of the month began to ulcerate, when he discovered another tubercle about three fourths of an inch from it, and this soon ulcerated, and others continued to appear and ulcerate, until the first of May, 1834. They then healed, and the swelling of the tongue became a little reduced, when the disease re-appeared in the leg, but in the back part of it, and with its accustomed violence, and began to ulcerate about the 1st of July. In August, the leg began to get better, when the disease increased again in the tongue, and soon began again to ulcerate; and a tubercle on the right side of the neck now suppurated, and began to discharge tuberculous matter.

He now went to the city of New-York for advice, where electricity was prescribed, and applied in different ways for about or nearly three months, during which time the ulcers of the tongue healed, and the tubercles on the side of the neck nearly disappeared; but on the left side of the tongue remained uninfluenced by the frequent and continued ap-

* In the cases where the uvula has been a long time very much enlarged and elongated, it should be cut off. I generally cut off about one half of it in such cases, to remove a constant source of irritation, which would otherwise greatly retard the cure. The operation is a very simple one, and is never attended with any danger.

plication of the electric shocks. The leg also during the use of this and other remedies continued to get better, and nearly healed. In two or three days after he had left the city of New-York, and discontinued the use of electricity, the tubercles on the side of the neck, and the one on the side of the tongue began to enlarge again, and in two or three weeks, two more appeared in the tongue and his throat began now to be sore and painful, and these symptoms continued to increase in violence.

On the 10th of January, 1835, he called upon me for advice. The right side of his neck was now swollen, tuberculated, and painful, and this pain frequently darted into the side of his face and head, and there were now two large tubercles on the left side of the tongue, and one about the centre of it, and one an inch from its apex, and three rising conspicuously from the right tonsil, which were very sensible to pressure, and with the swollen tongue produced painful and difficult deglutition.

Near the time the ulcerations commenced in the tongue, he began to feel lancinating pains in and through it, and they have continued with varying severity to this time; and all the tubercles that have appeared in it from time to time have invariably ulcerated, except the last three mentioned, and have left in it corrugated excavations.

There is now little or no swelling of the leg, and the tuberculous abscesses are all healed except one; but small tubercles of the size of small peas are felt under the skin in the back and front part of it.

He has suffered severely from this disease, and in one or two instances was reduced nearly to death, and has consulted and employed many celebrated physicians, all of whom called it mercurial disease, and prescribed, among other things, the compound sarsaparilla syrup, and cicuta, at a time when the disease was supposed to be terminating in cancer.

Diagnosis. Tubercula of the tongue, right tonsil, right side of the neck and right leg. Prescribed, magnetic pills and plaster. In less than one week, the tubercles in his tongue, tonsil, and neck, with the swelling of his neck, were very much reduced; and he now swallowed his food with much less difficulty, and the reduction continued; and at the end of two weeks the soreness of the throat had subsided, and he swallowed without difficulty; and at the end of four weeks, the tubercles and swellings of the tongue, tonsil, and neck disappeared, as well as the tubercles in the leg; and his health and flesh had increased so much, as to make him appear in perfect health.

Death from cancer of the tongue and throat, is, of all others, the most painful and most horrible, of which Mr. F. was advised, and for which he had been admonished to prepare.

The lapse of four years has shown the cure a permanent one.

Miss M. H——, of ——, aged 17 years. Called early in the morning to see her, in April, 1817; and was requested to examine her under lip, which was swollen and ulcerated, and to give my opinion of its character, and after examining it and the lymphatic glands of the neck, which were tuberculated on both sides, I pronounced it a case of scrofulous cancer. I was then requested to say whether I “could cure it without cutting it out,” and readily answered in the affirmative, and was then told by the female attendant, that, that was all they wanted of me, and that I was at liberty to return home as soon as I pleased, and accordingly bade her good morning, and returned home, perfectly in the dark, however, as regarded what was meant by this quixotic adventure. The next day, I was called again, and informed in explanation, that a celebrated surgeon had been attending the patient about two months, and as the lip continued to get worse, and had become very painful, he had advised them, a few days before, of the futility of all remedies, but the knife, and had set the time of ten o’clock of the day before to perform the operation; but they had dismissed him, and sent for me to perform the cure without it.

She was of the middling size, light and ruddy complexion, eyes rather large and prominent, and form of face approaching that of the Roman, and with perfect symmetry of body and limbs, was what may be called a scrofulous beauty, bating only this horrible lip.

Prescribed, magnetic pills and plaster.

In five weeks from this time the cure was perfect, and the tuberculated glands in the neck had gradually become smaller, and soon after disappeared.

This case, and the following one of the uterus, were apparently cases of scrofulous cancer. I have had a few other cases of the lip of the same character, and many of a similar nature, affecting the uterus, which were cured with these remedies, but which have apparently little or no effect on the disease in this form, when affecting any other part of the body. I have imputed their effects, in the cases of the lip and uterus, to the strong power of contraction which they possess, from the fact that the same results are obtained in cases where strong compression can be applied at the same time as in the case given of Mrs. H., of Union, Butler Co., Ohio.

TUBERCULA OF THE UTERUS, TERMINATING IN CANCER.

Menorrhagia terminating in Cancer.

Miss P. F——, of——, of full habit and light complexion, aged 22 years; called to see her, May 16, 1812. She has menorrhagia, which commenced four months ago. I prescribed the usual remedies for many months, during which time, as before, she had been constantly confined to her bed: but all to no purpose, and it now became necessary to abandon the patient or commence a new treatment.

She had from the first complained much of pain and weakness in the small of her back; which was attended with leucorrhœa. I proposed now to examine her back, and applied pressure on and around the lumbar vertebræ, and this produced violent pain, which, on every repetition of the pressure, darted into the uterus, and they appeared to be the same darting pains we find in cancer of the breast.

I now prescribed the magnetic pills and plaster. The plaster over the small of the back, or lumbar vertebræ, with injections into the uterus of a strong solution of acetate of iron, by means of a catheter and small pointed syringe.

Her symptoms began to improve slowly from this time, and in about three months, a very thick membrane separated from the inside of the uterus, and was discharged from it, rolled up—round—half an inch in diameter, and two inches in length, which was presented to me in a paper, and on unrolling and spreading it out on a stand, it presented two tumors or bunches, of dark colored fungi near the middle or centre of it, —one of which was near the size and shape of a chesnut, and the other of the size of a pea, and flattened on the sides that adhered to the membrane, and at a distance from each other of half an inch.

These fungi were on the outside of the membrane, or that next the uterus, and adhered to and sunk deeply into it; and there arose out of their tops and sides small white or light colored substances of the size and appearance of small threads, and from a line to a fourth of an inch in length.

On examining the other side of this membrane, small holes or chinks were found opposite to these fungi.

In a few weeks after this, her health was restored. She married about a year after, but has had no children.

NOTE.—It is now (1842) 30 years since I treated the above case, and the remedies by which this lady was cured, have fully maintained their reputation to this time; not only in tubercular disease of the uterus but in cases of the same disease affecting other organs.

CHAPTER VII.

TUBERCULA OF THE SPINE.

Lateral curvature of the spine—Caries of the vertebræ and distortion of the spine—
Spine and neck—Distortion of the spine and lumbar abscess—Caries of the vertebræ
—Lecture of M. Sanson on caries of the lumbar vertebræ, with observations on
it—Tubercula of the neck.

TUBERCULA OF THE SPINE—LATERAL CURVATURE OF THE SPINE

Miss E. B., of Stratford, Conn., aged twelve years. I called to see her in Dec. 1839, and on an examination found a lateral curvature of the dorsal vertebræ, a portion of which extended under, and raised the right shoulder blade. The right hip was also raised above the left, and her health and strength much reduced.

Prescribed, the magnetic remedies. The plaster to extend the whole length of the spine. The weight of her body was also directed to be suspended by her arms, with any simple contrivance, as by taking hold of a stick suspended from a ceiling, a few minutes, five or six times a day.

I called to see her again the last part of April, 1840, when, on examination of the spine, it was found to have resumed its natural position, and her health and strength perfectly restored.

The curvature commenced in this case about a year and a half before I first saw her in December, and gradually increased to the extent above mentioned. The result of this practice in such cases, is constant and uniform. In other cases, of many years continuance, little or no change is produced in the curvature, for obvious reasons, by this practice or any other, and the only benefit resulting from the use of these remedies in

these cases is the reduction of the disease in the spine, and also of the stomach, liver, or lungs, almost constantly accompanying curvature of the spine.

I frequently find such patients harnessed with cushions and splints, but regarding them as worse than useless, I always remove them.

Note E.

TUBERCULA OF THE SPINE.

Caries of the Vertebrae and Distortion of the Spine.

Master W. H. F., of the City of New York, of light complexion, aged 6 years. His parents brought him to me in Sept. 1837, with white swelling and distortion of the spine from tubercular disease of the eleventh and twelfth dorsal, and first lumbar vertebrae—the last dorsal projecting backwards, and it was with great difficulty he could maintain himself in an erect position. The disease (in which the common remedies had been used without benefit) commenced about two years before that time with pain in these vertebrae, which still continued with intervals of abatement, during a few weeks, when it would sometimes return with such violence as to produce spasmodic symptoms.

Prescribed, magnetic remedies.

His health soon began to improve, and in about six months it was entirely recovered. I examined his back a number of times during the summer and fall of 1838, and also on the 15th of June, 1839, and found it perfectly sound and strong, and he walked as erect, and appeared as well, as any boy of his age.

TUBERCULA OF THE SPINE AND NECK.

King's Evil, and White Swelling of the right side of the Spine.

Master J. M. S—, of Union, Butler county, Ohio, aged seven years. I was called to see him, August 3d, 1833. He had a white swelling on the under jaw of the right side, and a number of large tubercles on the same side of his neck, and a white swelling on the right side of the lower dorsal vertebrae, (back bone,) and it was now about three weeks since the disease commenced. Prescribed, magnetic pills and plaster. In six weeks the white swellings disappeared, and his usual good health was re-established.

September 23d, 1833. Prescribed for Master W. C., the brother of Master J. M. S—, aged 4 years. He had a white swelling of the neck, and lower jaw of the right side, over tubercles on the same side of

the neck. Prescribed, magnetic pills and plaster. In five weeks the swellings and tubercles had disappeared. His health continues good.

The case of J. M. S——, under the common treatment, like the following case of Master J. S——, would have terminated in distortion of the spine and lumbar abscess. This disease always commences with white swelling on the front or back side of the spine.

TUBERCULA OF THE SPINE.

Distortion of the Spine, Lumbar Abscess, White Swelling, &c

Master J. S——, of Sycamore, Hamilton county, Ohio, aged twelve years. I was called to see him October 24th, 1832. He has tubercles of different sizes, on both sides of his neck, and it is now six years since they first appeared, and his health began to decline; and he had now a distortion of the spine (back bone) ninth dorsal vertebræ, which formed an obtuse angle backward; and the lumbar vertebræ, (joints of the back bone belonging to the small of the back,) from this point to the os-coccyx, inclined to the right side, so far as to form nearly a half circle; which with the whole left side of the back, was occupied with a large lumbar abscess. The distortion of the spine commenced three years before, with white swelling on the right side of the spine. He had also a white swelling on the left thigh, and a very great enlargement of the abdomen, produced by an enlargement of the mesenteric glands. The lumbar abscess had been discharging scrofulous matter about two years, which now amounted to more than half a pint in every twenty-four hours; and he was so much emaciated as to make his face, chest and limbs, except the left thigh, appear precisely like a skeleton covered with a thin skin. He had a severe cough, and was expectorating freely, and had hectic fever, night sweats, and diarrhœa, with irregular vacillating pain in the chest and stomach, which was much increased by the little food he was able to swallow; and he was now, and had been for the last two months, so feeble as to be unable to move his head, body, or limbs, excepting only feeble motions of his arms. Three physicians had prescribed for him, at different times, without apparent benefit. Prescribed, magnetic pills and plaster. His health, in a few days, began slowly to improve, and the quantity of matter discharged from the abscess gradually became less, and his cough, expectoration, fever, night sweats, and diarrhœa gradually disappeared, and his strength improved. In May following, the discharge from the abscess was reduced to a tea-spoon full in twenty-four hours, and the lumbar vertebræ had resumed their natural situation, in a line with the dorsal; and the enlargement of

the abdomen had disappeared; and on the first of August he was able to walk.

There was in this case a loss of bony substance in the dorsal vertebræ, by the ulceration, and the matter formed by it passed down along the fascia of the psoas muscle, and through the groin into the upper part of the thigh and produced the swelling or abscess there. There was also a loss of bony substance by ulceration on the left side of all the lumbar vertebræ, and the matter discharged from these produced the lumbar abscess, and these losses of bony substance was the cause of the distortion of the dorsal, and of the obliquity of all the lumbar vertebræ

EXPLANATION OF THE SUBJOINED CUTS.

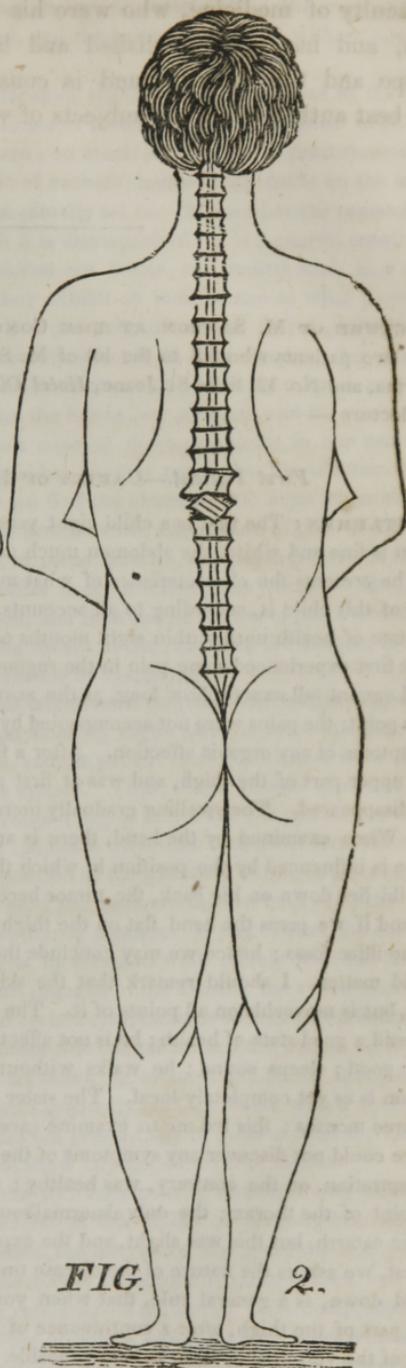
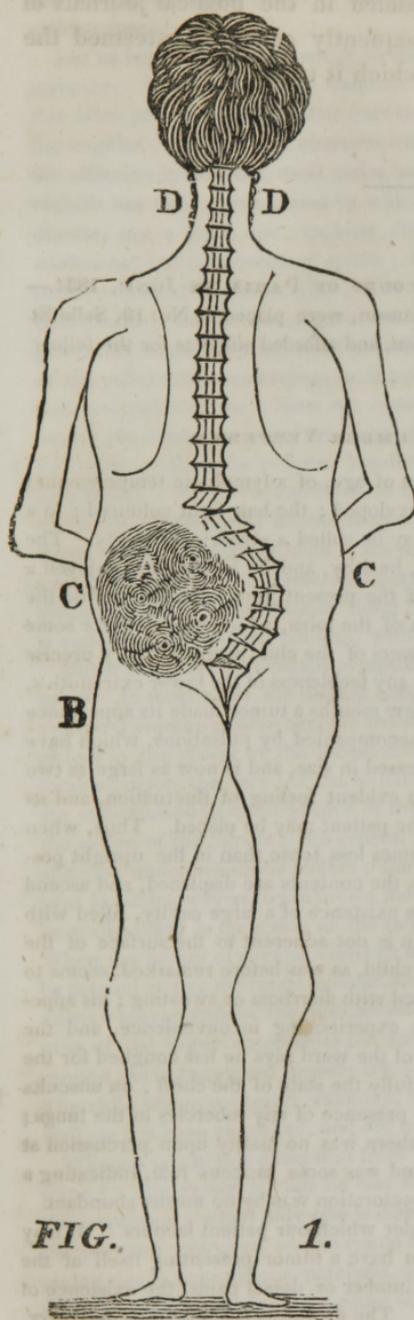
Fig. 1 represents the case of Master J. S., as it was when I first saw it in October, 1832. A, lumbar abscess, with four openings, from which matter issued. B, psoas abscess, situated in the upper and inner part of the left thigh. CC, abdomen distended by tuberculated intestines and mesentery. DD, line of cervical glands, tuberculated on both sides of the neck. See the description of it, page 91.

Fig. 2 represents the same case as it was when published in June, 1834, and as it now is. The distortion of the ninth dorsal vertebræ backward, will be seen as in Fig. 1, and the tenth dorsal fallen down on its side, or nearly so; and it would be difficult to tell, according to Mr Sanson's views of such accidents, where that portion of the spinal marrow is, that once passed through its centre.

Caries of the vertebræ is the consequence of tubercula, or white swelling of the vertebræ.

The disease it will be seen by an examination of the preceding cases, is easily distinguished by the new and natural symptoms in any of its stages, and easily cured by the natural remedies, and as a knowledge of these facts is of great importance to the community, I shall give copious extracts from a lecture on caries of the vertebræ, by M. Sanson, of the Hotel Dieu, who is one of the most distinguished surgeons in Europe, and was delivered before one of the most learned, and most numerous forums in the world, for the purpose of showing the great difficulty in distinguishing tubercula or scrofula, in this, as well as other parts of the body, by the common symptoms, and the common erroneous views of the disease, with the absolute uselessness of the common treatment for it.

M. Sanson was a candidate for the vacant medical chair in the university of Paris, occasioned by the death of Baron Boyer, and this lecture was a trial of his learning and skill, in an immense amphitheatre, before



the faculty of medicine, who were his judges, and more than 2500 students, and has been published and lauded in the medical journals of Europe and this country, and is consequently generally esteemed the very best authority on the subjects of which it treats

I. LECTURE OF M. SANSON AT THE CONCOURS OF PARIS, IN JUNE, 1834.—
The two patients who fell to the lot of M. Sanson, were placed at No. 19, Salle St. Martha, and No. 12, Salle St. Jeane, *Hotel Dieu*, and afforded subjects for the following lecture:—

First Patient.—CARIES OF LUMBER VERTEBRÆ.

GENTLEMEN: The first is a child eight years of age, of a lymphatic temperament; his skin is fine and white, the abdomen much developed; the hair light coloured; in a word, he presents the characteristics of what may be called a scrofulous beauty. The family of this child is, according to all accounts, healthy, and he himself has enjoyed a good state of health until within eight months of the present time. At that period the patient first experienced some pain in the region of the loins, which remained for some time, I cannot tell exactly how long, as the answers of the child were not very precise on this point; the pains were not accompanied by any feebleness of the lower extremities, or symptoms of any organic affection. After a few months a tumor made its appearance at the upper part of the thigh, and was at first accompanied by pulsations, which have since disappeared. The swelling gradually increased in size, and is now as large as two fists. When examined by the hand, there is an evident feeling of fluctuation, and its volume is influenced by the position in which the patient may be placed. Thus, when the child lies down on his back, the tumor becomes less tense than in the upright posture, and if we press the hand flat on the thigh, the contents are displaced, and ascend into the iliac fossa; hence we may conclude the existence of a large cavity, filled with a liquid matter. I should remark that the skin is not adherent to the surface of the tumor, but is moveable on all points of it. The child, as was before remarked, seems to enjoy still a good state of health; he is not affected with diarrhœa or sweating; his appetite is good; sleeps sound; he walks without experiencing inconvenience, and the affection is as yet completely local. The sister of the ward says he has coughed for the last three months; this led me to examine carefully the state of the chest; on auscultation we could not discover any symptoms of the presence of any tubercles in the lungs; the respiration, on the contrary, was healthy; there was no matity upon percussion at any point of the thorax; the only abnormal sound was some mucous rale, indicating a chronic catarrh, but this was slight, and the expectoration was by no means abundant.

What, we ask, is the nature of the disease under which our patient labours? It may be laid down, as a general rule, that when you have a tumor presenting itself at the upper part of the thigh, after a continuance of lumber or dorsal pains, the existence of caries of the vertebral column is very probable. The diagnosis is sometimes, however, accompanied with difficulties; in the present case, indeed, we are assisted by a leading symptom, for we have a slight gibbosity of the lumber vertebræ, and hence we are justified in concluding that the vertebral column is affected; we should, however, in all cases, wait for the formation of an abscess, before we give a decided opinion, because in

many circumstances, as in the case of a fall on the loins, accidental injury, &c., we have often the symptoms of vertebral disease, although no caries exist. But our patient was not affected by any accident of this kind, and the pains commenced without any appreciable cause.

Let us begin by endeavouring to determine the origin of the disease in the present instance. Rachitis is a very frequent cause of softening of the vertebral column, and this often produces the angular curvature; so much so, that many practitioners regard the angular curvature as a characteristic of rachitis, hence much doubt on the origin of the affection must exist, until caries has actually set in. But we have to remember that rachitis has a set of symptoms by which it is distinguished; it is a general constitutional disease, not a local one; rachitic children are feeble, and mostly sunk in a state of *abatement* and depression of spirits; they exhibit an indifference to what passes about them, while, at the same time, there is a precocity of mental powers, which is very remarkable; the gastric organs are usually affected in this disease; the mesenteric glands are engorged; the child has often diarrhoea, with a slow fever, or an acceleration of the pulse towards evening, he is pale, the lower jaw projects, and he gradually gets thin and pines away. Now we remark none of these symptoms in our patient; his health has been good, and we have, besides, another proof that his affection does not derive its origin from rachitis, besides we find the characteristic signs of an abscess by congestion. We have, therefore, in the present case, a formation of pus in the cellular sheath surrounding the lumbar nerves, or psoas muscles, and passing down as far as the thigh, where it presents itself; this matter is of an inflammatory origin. He first had pain in the part for a considerable period, and then the formation of pus which is now making its way to the exterior along the sheath of the muscles; the disease, in a word, is caries of the vertebral column, with abscess by congestion.

But we do not find here the symptoms which most commonly accompany caries of the spine. In most cases the disease commences by vague pains in some one point of the vertebral column; these become worse, and the patient soon experiences some difficulty or loss in the power of the locomotive system. Thus, if the disease commence in the lumbar region, the curve of the spinal column begins there, and the patient's movements are embarrassed in consequence of the influence which the change of form exercises on the action of the nerves; the general position of the patient is very characteristic of the affection under which he suffers; the head and neck are thrown back, and the legs are bent in such a way as to produce a most uneasy position. If you remark the child when he walks there is no action of the thighs, he seems to walk merely with the lower leg. When the bodies of several vertebræ are engaged in the disease, the spinal marrow may be pressed on in a moderate manner, and certain symptoms, as *subsultus tendinum* or convulsive movements of the muscles indicate this complication; the patient feels a weakness of the lower extremities; if he sit down or attempt to lift any thing from the ground, he is compelled to bend the limbs gradually, and dip down with a slow motion. The child whom we had to examine, did not present any of these accidents; he walked well, as has been remarked, and did not show any impediment of motion.

Whence arises this exception from the accidents usually accompanying caries of the spine? The reason is that he has several of the bodies of the vertebræ affected at the same time; when only one is diseased, the curvature which results is angular, and the pressure exercised on the spinal marrow is consequently more sudden and violent, giving rise to convulsions, paralysis, or retraction of the limbs. The compression of the spinal marrow is not the only cause of the disorders which we sometimes witness in the organs of locomotion; inflammation may come in as an accessory cause, extending from the bodies of the affected vertebræ to the membranes, and from the latter to the spinal marrow itself. We have, therefore, in the present case, caries of the vertebræ, and

abscess by congestion. The caries occupy many vertebræ together ; for if we examine the state of the spinal column we find a gradual bend, quite different from the sudden angular curvature when one vertebræ only is diseased ; and this circumstance fully explains the little or no difficulty of motion which our patient experiences, his upright posture in walking, and the freedom from all unpleasant or dangerous accidents.

The question now arises, what is the cause of the disease in the present case ? The exciting causes of caries of the vertebral column are in general difficult to discover. Our patient's father is a tailor, and his children have been accustomed to spend their time in a low, ill-ventilated shop. This may be the origin of the scrofulous affection under which he now suffers, and although the cause is not very well marked, yet the bad habit of body, contracted by living in an unwholesome place, is sufficient to excite the disease.

In what state is the vertebral column ?

The affection sometimes commences in the bodies of the vertebræ, and then we have them only inflamed. If it persist for some time, the weight of the body begins to act on the altered and softened bone, breaks it down, and a curvature, more or less prominent, is the consequence. But in our patient we have not only inflammation of the bone but suppuration also. The disease is not confined to a simple ramollissement ; the spongy tissue of the bones has become fungous, purulent matter is secreted by them, and a large cavity exists, filled with that fluid. If we had an opportunity of examining the state of the parts which transmit the pus from the seat of the disease to the exterior, we should find a long channel, hallowed out through the cellular sheath surrounding the muscles ; the channel is lined throughout by a membrane which constantly secretes pus, and is called by surgeons puro-generative (*puro-genie.*) In its structure it resembles somewhat that of the mucous membranes.

How does the disease terminate ? (Here M. Sanson entered into an extensive examination of the different ways in which caries of the spine may end, and of which we need give but a very faint outline.) The affection in the first place may go on and become daily worse ; the inflammation extends to the membranes of the spinal marrow, and to the medullary substance itself ; we have then the development of a new set of symptoms ; motion becomes irregular and interrupted, and paralysis is finally established. The patient is now confined altogether to bed, his health is completely destroyed, the long-continued pressure brings on gangrene of the buttocks, &c., and death ensues. In many cases, however, the purulent collection opens by a small abscess in the thigh ; the opening is often very minute, but this does not prevent the entrance of atmospheric air into the cavity. The patient soon presents severe typhoid symptoms, from the degeneration of the purulent contents of the abscess ; his lungs are attacked, and on examination, we find tubercles, which, perhaps, we did not before suspect or discover ; diarrhœa now sets in, and he soon sinks in a state of exhaustion. In other more favorable cases the termination is of a different character. The tissues surrounding the diseased and carious vertebræ furnish a bony matter, and the destruction of the hard parts is in some degree repaired ; the pus becomes concentrated and dries, the abscess contracts, and its sheath is gradually changed into a kind of canal, which no longer secretes puriform matter, and is at length totally healed, or the abscess may open externally, and terminate like any other abscess in a different part of the body ; however, in most cases, where the abscess thus opens spontaneously, it becomes fistulous, or the patient dies.

Let us now consider the treatment which should be adopted in the present case. If we look to the general health of our patient, we find it very favorable ; his constitution is good, there is little or no pain, and we may say that he is in a promising state, and that the affection under which he labours is as simple as it is capable of being. He has, in fact, no fever of any kind, he does not suffer from diarrhœa or hectic perspirations, and

there are no symptoms of constitutional derangement. The pain in the lumbar region has considerably diminished, and the abscess has not yet opened externally. There are, however, on the other hand, some unfavourable conditions in the present case; thus, for example, if the extent of the caries, by destroying several of the bodies of the vertebræ, has the effect of preventing any injurious pressure on the spinal marrow, yet a greater quantity of osseous tissue is necessarily affected, and the labour of regeneration will be more difficult or uncertain; and again, although, on examination of the chest, we found no signs of the existence of tubercles, yet, from the child's general appearance and temperament, we may fear their formation at a subsequent period. Hence the prognosis in the present case must be guarded, and the chances of a cure are perhaps, less numerous than those of a fatal termination.

Sometimes the caries of the vertebral column is superficial, and we may attack it with a reasonable hope of attaining a successful result; but not so in the case of our patient. The disease has already existed for too long a time, and the lesion is too profound. What then are we to do? It may be remarked, in the first place, and as a principle of treatment, that the affection is originally an inflammatory one, and hence the antiphlogistic treatment should form the principle we ought to have in view. When I mention antiphlogistic treatment, I do not refer exclusively to bloodletting and debilitating measures; these only form a part of it, regarded as a whole. I allude to another and an important branch, viz., the revulsive part, which is included in the term antiphlogistic treatment, and not to the sanguineous, which, in most cases, is not to be thought of.

The first means I would employ is the moxa; this is a most powerful and efficacious external irritant, and we may apply it over various points of the spine, so as to multiply the foci of irritation, according to the method recommended by Baron Larrey; he has often placed thirty or forty moxæ along the spine, and this application has been attended with very remarkable success.

At the same time that we attack the disease by local measures, we should not neglect general constitutional treatment. Our first and principal object should be to correct the scrofulous temperament, which is strongly marked in the patient; this is to be done by the treatment with which every one is familiar; the child should have good, nourishing, easily digested food; he should live in a wholesome atmosphere, exposed to a fresh healthy air; he should take gentle and constant exercise, &c., and we may aid these means by the administration of bitters, if indicated.

Here M. Sanson entered into the different modes of treating the abscess, which is unimportant, and unnecessary to notice, and then passed to the consideration of his second patient, with lymphatic engorgement of the breast, which I propose to notice at a future period.

It will be observed, that after describing the common symptoms in this case, M. Sanson asks, "what is the nature of the disease? and after observing that "the diagnosis is sometimes accompanied with difficulties," acknowledges that "in the present case" he is "assisted by a leading symptom, a slight gibbosity of the lumbar vertebræ." It excited, however, so little attention, in his examination of the case, that he forgot to mention it in his description of the symptoms.

The nature of this gibbosity, or swelling, and the sympathies excited by it, could not, therefore, have been known to the learned author of this lecture, for in such case, the natural associations of his mind would have

led him to a critical examination of it, and of the cervical and sub maxillary glands, which he would have found tuberculated.

These swellings of the vertebræ and tuberculated glands, may always be found in the first stage of the disease, as well as the last, and should always be decisive of its nature, and consequently we never should do as he says, "wait for the formation of an abscess, before we give a decided opinion," but on the contrary, we should commence our treatment immediately, to remove the disease in the first stage, and prevent the formation of caries and abscess, and their deplorable consequences.

He labours to show that caries of the spine has an inflammatory origin—tells us that it is different from rachitis, (rickets) because, in this case, "we find the characteristic signs of an abscess by congestion,"—tells us, also, of "the bodies of the vertebræ" being "inflamed"—that "in this case, we have not only inflammation of the bone, but suppuration also"—that "this matter has an inflammatory origin," and repeats again and again, that the abscess, "is an abscess by congestion."

In replying to these vagaries, (for such they really are,) it may be useful to observe, that in this disease, we rarely see two cases precisely alike, and that the common symptoms, are always varied according to the different parts, situation, and number of the vertebræ affected, and by its almost constant complication in some of its stages, with tubercula of other parts of the system, and that the idea of the abscess being "an abscess by congestion," or inflammation, and the vertebræ, or "bones," being "inflamed," or in a state of inflammation, and that, "the affection is originally an inflammatory one," is all visionary theory, and the old visionary theory too, of the schools which was never favoured with the evidence of its real existence in chronic diseases.

The abortive attempt of M. Sanson to show a distinction between the disease in this case and rickets, will be seen on comparing it with the case of Master J. S., who, besides an abscess in the upper part of the thigh from caries of the vertebræ, as in this case, had also the common symptoms of rickets, or those given as such by M. Sanson, at the same time, which demonstrates their unity; and yet Mr. Sanson describes the same symptoms, to show they are different diseases. His description of the common symptoms of both, is consequently lame, confused, irregular and unnatural. There are really, therefore, no such diseases as are here described by M. Sanson, as nature is necessarily uniform in all her works.

His treatment, it will be seen, corresponds with his theory. It is "the antiphlogistic," or debilitating treatment, "in which bleeding forms a part," and the same that is pursued in chronic diseases of the organs and limbs. It is founded on a theory that was formed, like many others, with a very superficial knowledge of the construction of the elementary

organs, and of the motions of the elementary and compound organs, and without the least knowledge of the causes of these motions, or of the great sympathetic motions by which these are regulated and sustained, or of the natural remedies founded on a knowledge of these causes and motions—a theory which has consigned its millions to a premature grave. And the few that nature has been able to sustain against the combined influence of the disease, and this treatment, may be seen in our towns and cities,—some pale, sallow, feeble, and emaciated, and others with distortions of the spine, and tuberculated and amputated limbs, and who have long been perpetual monuments of its folly. Hence the cause of the grave scepticisms of some, and the ridicule of others, in regard to the real usefulness, or great importance of the medical art,—of the great number of nostrums for these diseases,—of the mazes of Doct. Philip,*—the visions of Prince Hoenlohe, and of the *very learned* theory, and *very scientific* atomic, or seventy-thousandth-part-of-a-grain-practice, of the great German professor.

The cases before noticed of Master J. M. S. and Mr. W., like that of M. Sanson's, commenced with a small gibbosity of the vertebræ, and both would have terminated, like his, in caries and abscess, under the common treatment, or that recommended by M. Sanson. The case also before noticed, of Master J. S., was so much worse than that of M. Sanson's, as hardly to admit of a comparison, and yet he is preparing himself for a public teacher, while M. Sanson acknowledges, that the "lesion," in the case of his patient, although so comparatively trifling, is from his knowledge of the dependence that can be placed on the common treatment, "too profound" to give "a reasonable hope of attaining a successful result."

The disease, in the case of Master J. S., after it commenced in the dorsal, was gradually extended to the lumbar vertebræ. An abscess was formed in the upper part of the thigh, and on the back, by the matter discharged from the carious bones; and the disease propagated to other organs. And with caries and distortion of the ninth dorsal; and caries and obliquity of the last dorsals, and all the lumbar vertebræ—with tuberculated stomach, intestines and mesentery; and tuberculated and ulcerated lungs—with the motions of his body and limbs paralyzed, and his legs flexed, in right and obtuse angles, from compression of the spinal marrow; combined with great precocity of intellect, hectic fever, night sweats, diarrhœa, and a frightful marasmus; presented the most appalling effects of this disease, and of the common remedies.

Under the use of the natural remedies, the further progress of the

* Dr. Philip imagined, he could distinguish chronic diseases of the different organs by the pulse

disease was stayed—the tuberculations reduced, and the work of re-formation commenced, to replace the great loss of substance; and he slowly, but gradually, arose from his most deplorable position, and stood erect, and remains, like many similar cases, a monument of the value of the simple and natural remedies, indicated by the really simple nature of the disease, and of the futile nature and folly of the common treatment.

Acute or inflammatory diseases, requiring the antiphlogistic treatment, run through their course, and terminate in a few days or weeks; but contra, or chronic diseases, are slow in their progress, and continue many weeks or months, and sometimes years, before their termination, and require a treatment entirely different, as every body knows, except physicians, who, in spite of the every day evidences of their own senses, still adhere *scientifically*, to the old unscientific theory and practice of the schools.

This case, and lecture, are full of instruction, and it should never be forgotten, that the reason which induced M. Sanson to advise to wait for the formation of an abscess, before we give a decided opinion in such cases, is the consequence of the great difficulty in distinguishing chronic diseases in their early stages by the common symptoms. The deplorable consequences, resulting from this necessity, must be apparent to all, for instead of attacking and reducing the disease in the first stage, when affecting the spine, organs, or limbs, we must wait many weeks or months, and sometimes years, for the formation of an abscess, before we can, by the common symptoms, “give a decided opinion,” or commence the proper treatment; or until the disease is so far advanced, as to preclude, in a great majority of cases, “a reasonable hope of attaining a successful result”

TUBERCULA OF THE NECK.

King's Evil.

Master John Watson, of the City of New York, aged eighteen years. He had large tubercles on both sides of his neck, and in the last part of November, 1838, a general swelling commenced over them, and gradually increased to December 19th of the same year, when they had become very large. He then commenced the use of the magnetic remedies. Matter was formed in the swelling on the left side, which broke and discharged scrofulous matter six or seven weeks. The abscesses then healed, and the swelling with that on the right side of the neck, entirely disappeared in about six months from the time he commenced the use of the remedies. His health was then re-established, and has continued good to this time. *Sept. 1, 1840.*

CHAPTER VIII

Tubercula of the knee, terminating in consumption—Of the ankle joint—Of the joints and limbs, with ulcers, white swellings, abscesses, and caries of the bones—Of the knee and mesentery—Of the neck and mesentery—Of the left foot and hip—Of the left leg—Of the hip joint—Of the heel and ankle joint, with abscesses and caries of the bones—Of the uterus and right leg—Colour of the skin in chronic tubercula—tubercula connected with syphilis—Index—Glossary.

TUBERCULA OF THE JOINTS AND LIMBS.

In consequence of there being no generally known remedy for tubercula, it is the practice in this country, and in Europe, and in the hospital and country practice, to amputate or cut off the limbs in cases of tubercula, or white swellings of the joints or limbs, whenever the disease is supposed to have advanced so far as to endanger life. The relief in such case is, however, generally very temporary, as the disease is commonly soon developed in another joint, limb, or organ, and such patients consequently receive, from such severe operations, but a brief immunity from pain and death. In the case given of Mr. J. S., of Preble county, the thigh was amputated for a white swelling of the right knee; but the disease soon after attacked him in the left hip, and then in the left foot, when that of the hip became passive. If, in this case, the left leg, like the thigh of the right side, had been amputated on account of the disease in the foot, according to the common practice, the disease in the hip would have quickly become active, and Mr. J. S. soon numbered with the dead.

This case, with that of Miss M. G., of Springfield, with acute white swelling of the heel; and Master W. L., of Madison, with the disease in all the limbs and many of the joints, with a great variety of similar cases, show what is effected by the natural remedies, without amputation. And I may here remark, that on examining the cases of amputa

tion for tubercula of the joints and limbs, reported in the *London Medical-Chirurgical Review*, during the last ten years, and including those that are called by different names, but really the same disease, there can be little or no doubt, but at least three-fourths of the number would have been rendered unnecessary, if the use of these remedies had been commenced, even at as late a period as that in which the operations were performed. And this opinion is hazarded with the full knowledge of the fact, that these reports were principally from the Hospitals of London and Paris, and that these operations were performed by, or with the advice of physicians and surgeons, who rank among the first members of our profession. The tuberculous or scrofulous diathesis or taint, is destroyed by the natural remedies, but remains in the system after these operations, and the disease is propagated to other organs and limbs

TUBERCULA OF THE LEFT KNEE, STOMACH, AND LEFT LUNG

White Swelling, Dyspepsia and Consumption.

Master Alexander Benedict, of light complexion, aged 15 years, came into my office on crutches, in June, 1837, accompanied by his father. On examining the son, I found he had a white swelling of the left knee, and tuberculated stomach and left lung. The disease commenced in the knee about five years before, and progressed gradually under the treatment of the best physicians and surgeons of this city, until February, 1837, when the disease commenced in the lungs, with cough and expectoration, which still continued, and he was then pale, feeble and emaciated. Prescribed the magnetic remedies. I heard no more from the case until October of the same year, when he called at my office with his father in perfect health. The white swelling of the knee, with the cough and expectoration, had entirely disappeared, and he had gained so much flesh and strength as to make him appear in as good health as that of any other person, and his health has continued good to this time.

NEW YORK, JUNE 8, 1840.

I have read the above description of the case of my son, and will add to it the fact of my having paid to the best physicians and surgeons of this city, about a thousand dollars for their attendance on him, and that they had given up the case, and told me that he could not be cured, but must die; when a gentleman, (Mr. Baker) advised me to take him to Dr. Sherwood; I did so, and got him cured at last, as stated above, for ten dollars.*

SAMUEL W. BENEDICT,

No. 2 Merchants Exchange.

* I have had a great number of similar cases which have terminated in the same manner, and in which from fifty to five hundred dollars has been first paid to other physicians and surgeons for their attendance upon them.

ACUTE TUBERCULA OF THE ANKLE JOINT—ACUTE WHITE SWELLING OF
THE ANKLE JOINT.

Master John Lepine, of the City of New York, aged 12 years. He began to have severe pain in the right ankle joint, about the first of January, 1840, which was soon followed by swelling, and, in a few weeks, matter was formed and discharged from the left side of the joint, which matter was a thin sanies mixed with cheesy concretions. He was treated by a physician of this city in the usual manner, until the 18th of March, without any other effect than a palliation of the symptoms. At this period he commenced the use of the magnetic remedies.

Under their use the character of the discharge from the ankle joint was changed, in a few days, from a thin sanies to a thick yellow matter, which soon began to decrease in quantity, as also the swelling, and in the course of six weeks he was able to draw on his boots and walk about, and has continued to do so every day since that time. I saw him and examined the ankle to-day (June 8th)—the swelling and pain have subsided, and there only remains a very slight discharge from a small orifice in the skin, which will be closed in a few days.

July 27th. A small piece of bone was discharged from the orifice a few days after the above date, when it closed, and the ankle is now perfectly well.

I have received many letters of commendation for the success of my practice in chronic diseases, and cannot well resist the temptation to publish the following from a lady of this city, who is anxious to add her testimony to the benefits resulting from the use of my remedies.

NEW YORK, SEPT. 7, 1840.

DR. SHERWOOD,

SIR: Having been informed of your intention to publish a pamphlet, containing an account of cures performed by your magnetic remedies, I deem it important to lay before the public a statement of your success in the case of my son. He had injured his spine by a fall from his chair about two years previous to your undertaking the cure of him, and had suffered much from the disease which ensued, as well as from the remedies of various physicians, with no material benefit, until the application of your remedies, when his recovery was rapid, and he is now in the enjoyment of perfect health.

The handsome manner in which you so disinterestedly came forward to the assistance of several poor people in our neighbourhood, particularly in your successful treatment of an aggravated case of white swelling of long standing, will be long remembered with gratitude, and must establish the superiority of your remedies in cases of the above character. Certain that to your exertion I am indebted for the life of my child, I wish you all possible success in the heavenly art of healing the sick.

Respectfully yours,

* * * * *

The first case referred to by this lady, was that of a white swelling and distortion of the spine; and the last, a very bad case of white swelling of the knee of a young lady of six years standing, which had resisted both the hospital and private practice.

TUBERCULA OF THE JOINTS AND LIMBS.

Ulcers, White Swellings, Abscesses, and Caries of the Bones.

Master W. L., of Madison, Butler county, Ohio, aged eleven years. I was called to see him, May 29th, 1833. He had scrofulous tubercles, and a scrofulous ulcer on both sides of his neck, a white swelling of the left arm, between the shoulder and elbow, and another of the left ankle. He had also a white swelling of the right knee, and also of the right ankle, and another of the third joint of the fore-finger of the right hand. The white swelling of the left arm was discharging scrofulous matter from abscesses in four places, and that of the left ankle in two places, and that of the right ankle, and that of the hand, in one place each.

The disease commenced about a year and a half before, first with white swelling of the right knee, and the other swellings, ulcers and abscesses gradually appeared as the disease advanced. He was now confined to his bed and unable to walk, was feeble and emaciated, entirely deaf, and suffered much from pain, mostly at this time in both ankles and the left leg. Prescribed the magnetic pills and plaster. The pain in his limbs began to subside in a few days, and his health to improve; a piece of bone two inches long, half an inch wide, and three-eighths of an inch thick, separated from the bone, and was removed from the left arm. The white swellings gradually became less, and in six weeks he was able to walk about in the fields. The swelling of the thigh terminated in abscess; I opened it, and it discharged about three gills of matter, and then healed rapidly. *November 1st, 1833.* The white swellings have all disappeared, and the abscess and ulcers healed, and his general health is good.

His jaws were so nearly closed as to only admit a finger between them. All the teeth on the under jaw of the left side came out, and also a part the jaw bone, the whole length of the jaw in which the teeth were set, and there has come out of the same place an entire new set of teeth, and he can now open his mouth as wide as he ever could, and, besides, there has come out of the roof of his mouth a number of small pieces of bone.

Pieces of bone also came out of the upper end of the tibia (shin bone) of the right side, from the left ankle joint, the left clavicle, (collar bone,) the mastoid process of the right side, (bone that projects under the ear,)

and from the under jaw bone of the right side; and the right leg was drawn back so as to form nearly a right angle with the thigh, and the left so as to form an obtuse angle.

TUBERCULA OF THE KNEE AND MESENTERY.

Mr. D. C., of Springfield, Hamilton county, Ohio, farmer, aged thirty-nine years, came to me October 15th, 1832, with white swelling of the left knee, and enlargement of the abdomen, which we supposed to be dropsy, but it was evidently caused by enlargement of the mesenteric glands. His health has been declining more than a year, and the enlargement of the abdomen commenced about a year, and the swelling and pain in the knee, which now rendered him a cripple, about four months before. Prescribed the magnetic pills and plaster. In five weeks from this time the swelling of the knee and enlargement of the abdomen had disappeared, and his usual good health was restored.

TUBERCULA OF THE NECK AND MESENTERY.

Master T. I., of the city of Cincinnati, aged 18 months. I was called to see him about September 1st, 1830. He had scrofulous ulcers under each ear, which were discharging scrofulous matter very freely, and a number of tubercles of different sizes, on both sides of the neck, and an enlargement of the abdomen, with diarrhoea. It was now more than a year since the disease commenced, and he had irregular fever and was feeble and emaciated. Five or six physicians had attended and prescribed for him, but the disease grew worse. Prescribed the magnetic pills and plaster. His health began to improve in a few days, and in about six weeks the ulcers were healed and the tubercles had disappeared, and his health was in all respects restored.

TUBERCULA OF THE LEFT HIP AND FOOT.

After amputation for tubercula of right knee.

Mr. J. S., of Preble county, Ohio, of light complexion, aged 19 years, called on me, September 19th, 1836. His right thigh was amputated about five years ago, on account of white swelling of the right knee, soon after which he began to feel pain, sometimes in the left hip, and at others in the knee, and these pains continued, with varying severity, until about

ten months ago, when his foot began to swell and to be painful. The pain in the hip and knee then subsided. The white swelling is now large, and extends over the foot, and sides of the foot, and he has tubercles on both sides of his neck, and his health has continued feeble since the amputation. *Diagnosis.* Chronic tubercula of the hip joint and foot.

Prescribed, magnetic pills and plaster. *October 7th*, the whole swelling is gone, excepting only a small abscess, which, on being opened, discharged two teaspoons full of tuberculous matter. The plaster was now re-applied, and the pills continued, and in three weeks the abscess was healed and his health restored.

ACUTE TUBERCULA OF THE LEFT LEG.

Master W. L., of Somers, Preble county, Ohio, aged five years; called to see him October 11th, 1834. He had a violent and spasmodic pain in the lower and forepart of the left leg, with intervals of ease. The disease commenced five or six days before, and, on examining his neck, I found five or six large tubercles on the left side. A physician had been every day in attendance, and had prescribed the usual antiphlogistic remedies, including a blister over the swelling; but the pain continued with unabated violence, and the patient, in his agony, continued to make the welkin wring with screams.

Diagnosis. Acute tubercula. I now took a scalpel, and laid the swelling open along the course of the tibia, about an inch and a half through the blister, integuments and periosteum to the bone.

This operation, though a severe one, was less painful than one of those turns of severe pain. I now placed a linen cloth over it, and directed it to be wetted in a triple solution of sulphate of copper, iron, and alumine, in the following proportions, viz., blue vitriol one-fourth of an ounce, copperas and alum, each half an ounce, water one pint, and also to wet a roller bandage in this solution, and commence at the toes, and roll it moderately tight over the foot, ankle, and leg to the knee, and at night to remove it and apply a fermenting poultice over the limb; and in the morning to apply again the cloth, wash, and bandage, and to continue this course until the pain ceased, and then to discontinue the wash and poultice, and apply magnetic scrofulous plaster, with the roller bandage. I also prescribed magnetic pills; one to be taken night and morning for one week, and afterwards one every night.

The turns of spasmodic pain now gradually decreased in frequency and violence, and in nine days he was able to walk about the house, and in less than two weeks after this his leg was healed, and his health restored.

TUBERCULA OF THE HIP JOINT

Disease of the Hip Joint.

Master J. C., aged 14 years, called to see him November 20th, 1828. He had been complaining of pain in his right knee, with a little lameness every two or three days, during the last two weeks, but is now confined to his bed, with pain in his right hip. He lays on his left side, with his thighs drawn up, and every attempt to move the limb produces pain in the hip, and he cannot bear pressure on the joint or in the groin. On comparing this joint with the left, there was no swelling or enlargement, but, on the contrary, it appears rather less or flattened on the out side of the joint, and the limb appears shorter than the other. He has some fever; is very irritable, and has tubercles on the right side of the neck and in the groin.

Prescribed, magnetic pills, and a large poultice to the hip and groin, to be renewed once in four hours. *November 21.* Pain abated, discontinued the poultice, and applied magnetic plaster over the hip and groin.

November 23. Pain in the joint much less, and he rests better during the night. On removing the plaster, the hip and groin were covered with small vesicles and ulcerations. The same plaster was spread again, by adding a little more to it, and re-applied.

November 26. He continues better, but the joint is in every attempt to move it still very painful. The same course was continued, and in four weeks he was able to sit up, and in two weeks more, was able to walk with a little lameness, from which he entirely recovered in a few days, and without any shortening of the limb.

There are a few cases in which I use other external applications instead of the plaster, as will be seen by the two following examples.

TUBERCULA OF THE HEEL.

Acute White Swelling of the Heel and Ankle Joint, with Abscesses and Caries of the Bones.

Miss M. G——, of Springfield, Hamilton county, Ohio, aged twelve years. I was called to see her, February 5th, 1833. She had been attacked with acute white swelling of the left heel, three months previous to this time. The whole foot and ankle was now swollen as large as the skin would admit, and was œdematous, and extended half way to the knee. There were three abscesses on the right side of the heel, five on the left, and two on each side of the ankle joint, all discharging scro-

fulous matter, of a greenish-yellow color, and the whole foot and ankle had a dusky yellow appearance. There was little or no sensibility in the skin, but a great discharge of matter, with acute pain on pressure. On introducing the probe into the abscesses, the bone was found bare in three of them on the left side of the heel and foot, and had a rough feel. She had a number of tubercles of different sizes, from that of a pea to a walnut, on both sides of her neck, and was now, and had been from the first, confined to her bed, and is now very feeble and emaciated, has hectic fever, and has suffered much from pain in the heel and ankle. About three weeks previous to this time, the attending physician proposed to amputate the limb, (as is customary in such cases) as it offered, in his opinion, the only chance to save her life. Her parents, opposed to this last resort, sent for a celebrated physician of a neighboring town in consultation, who was of the opinion that she would not recover, whether the limb was amputated or not.

Prescribed, magnetic pills and a wash for the limb, composed of sulphate of copper (blue vitriol) a quarter of an ounce, sulphate ferri (copperas) one ounce, sulphate of alumine (alum) one ounce, dissolved in a pint of warm water. A roller bandage to be wet in this solution and applied to the foot, ankle and leg, and to be kept wet with the wash through the day, and at night to remove the roller and apply the common fermenting poultice through the night alternately. *February 15th.* The swelling of the limb has lessened more than one-half. The cuticle (scarf skin) very much thickened, has peeled off of the entire foot, and it has a much more healthy and natural appearance. Her fever has nearly disappeared, and her health much improved, and she is able to sit up. Her health continued to improve without any interruption, with the same treatment, and in two weeks more the swelling had disappeared from the foot and leg, except at the heel, and in another week the abscesses on both sides of the ankle joint, and on the right side of the heel, were healed. The magnetic plaster was now applied to the left side of the heel. She was able to walk soon after this, first on crutches, and then without them. More than a dozen pieces of bone came out of the left side of the heel and foot, two of them large and of the circumference of a quarter of a dollar. Her father and mother are both scrofulous.

TUBERCULA OF THE UTERUS AND RIGHT LEG.

Mrs. H., of Union, Butler county, Ohio, of the middling size, and good constitution, aged 46 years.

Called to see her August 17th, 1833. She has a large fungus ulcer on the right side of her right ankle. The foot and leg swelled as large

as the skin will admit, which has a shining appearance, and the ulcer black and depressed from the surrounding everted edges of the skin. It is in form perfectly round, and as large as the circumference of the top of a large tea cup, and is to the depth of half an inch, a gangrenous mass of fungi, which emits a horrible smell. The swelling commenced about three months since.

Her countenance is pale and sallow, and she has leucorrhœa, with which she has been affected more than two years, and she is now feeble and emaciated,—is suffering severely with dull and lancinating pains in the ankle and leg, and is confined to her bed.

She has a number of tubercles on the right side of her neck, and pressure on two of the lumbar vertebræ produces pain, which darts into the uterus. Prescribed the magnetic pills and a grain of quinine, three times a day, with a large fermenting poultice to the foot, ankle and leg, to be renewed morning and evening, and the magnetic plaster over the lumbar vertebræ. *August 22nd.* The swelling of the limb is very much reduced, and the gangrenous fungi have sloughed out and left a large and round chasm half an inch deep, the bottom of which is covered with fungus or round elevations, of a red colour, surrounded with a white colored matter, and the edges of the skin every where everted, and besides this formidable ulcer, the whole of the back part of the ankle, from an inch above the bottom of the heel to four inches above the ankle, is now one mass of fungus or loose and spongy ulcers, the skin having entirely disappeared.

The limb was now washed with a solution of chloride of mercury, and adhesive plaster, spread very thin on strips of cotton cloth, two and a half inches wide, and long enough to reach round the limb and lap over two inches, and a sufficient number of them so spread to cover the limb from the lower part of the ankle to a point seven inches above it. I commenced applying these strips by making one end stick fast to the side of the heel, and then drew it round below the ankle moderately tight, and then took up another and fastened it as before, and lapped it on the first about an inch, and drew it out, and let it lap over the end of the strip as before, and so with the remainder of the strips, until they were all on.

I then took a roller bandage, wet in the above solution, and commencing at the toes, rolled it over the foot, ankle and leg, to the knee. Directions were now given to keep the roller wet with the solution, and remove it and the strips of plaster, and wash the leg and ulcers, and re-apply new strips of plaster, and the roller, in the same way night and morning, and in case the limb should become more painful, to remove them, and apply the fermenting poultice for twelve hours, and then again apply the wash, strips of plaster, and roller.

September 8th. The swelling of the limb has subsided, except a little about the ulcers, and they have commenced healing from their extreme points towards the centre. Her health has improved so much as to be able to sit up the most of the day, and the quinine discontinued.

October 3d. Her leucorrhœa has disappeared, and the ulcerations reduced to about one-third their original dimensions. The same course of treatment was continued with little variation, and in about two months they healed entirely, when her health was fully re-established.

The manner of applying adhesive strips of plaster pursued in this case was first recommended by Cooper, in cases of the common ulcerated legs, and it cured some cases, but the disease generally returned again after a few weeks or months. When, however, the disease is treated like this case, with the magnetic pills and the adhesive strips of plaster, the diathesis or taint in the system from absorption from these ulcers is destroyed, and the disease does not return. The adhesive plaster I use in these cases is much better and cheaper than that obtained from the shops, and is made by boiling rosin and lard in water an hour, in the proportion of one ounce of lard to every pound of rosin, and when nearly cold may be made into rolls of any convenient size. The rosin must always be good and free from impurities. The plaster must also be spread very thin and very even, and always applied precisely in the same way as in this case, when it cures the disease, if it is not of more than seven or eight years' continuance, in from five to seven weeks.

COLOUR OF THE SKIN IN CHRONIC TUBERCULA.

In the foregoing cases of chronic tubercula of the limbs, neck, head, and face, there was little or no discolouration of the skin, and there is little or none of the membranes which cover the tuberculated organs. There are, however rare cases of this disease in which a red colour of the skin is sometimes produced by accidental causes, and in order to prevent these cases which are incurable by other remedies, from being mistaken for another disease, the following case is presented.

Miss M. G., aged ten years, was brought to me January 26th, 1836. The lower half of her nose is swelled and of a scarlet red colour. The lower half of both cheeks, upper and under lip, and chin, are also swelled, and of the same scarlet colour, and they all have a smooth and shining appearance, except in some places along the cheeks where they are tuberculated, and along the upper lip where tubercles have ulcerated and are discharging matter.

The disease commenced about five years since with pain, and then a thin or sanious discharge from the nose, which from its frequent application to the skin produced the swelling, ulceration, and scarlet colour of this part of the nose and face

She has a black and very intelligent eye, and is apparently a perfect beauty, saving the frightful deformity produced by this disease, from which she has suffered long, and sometimes severely.

The line or ganglia of glands on both sides of her neck, with the sub-maxillaries under the jaws and the parotids are tuberculated. The tubercles very large, and painful under pressure.

Pressure on a small tubercle of the right side of the first cervical vertebræ produces pain, which darts into those under the jaw, and into the throat of the right side and into the nose. Pressure on one of the left side of the same vertebræ produces pain which darts into those under the jaw and into the throat and face of the left side. I now examined the mouth and found both tonsils tuberculated, and the tongue one-third larger than natural. A number of physicians have as usual attended and prescribed for this patient. *Diagnosis.* Tubercula of the nose, face, tonsils and tongue. Prescribed magnetic pills and plaster.

The disease began to subside in a few days, and at the end of ten weeks it had entirely disappeared, and the colour of the skin natural. One plaster was applied in this case over the first cervical vertebræ. One over the lower part of the lower jaw and upper part of the neck of both sides, and one over the swelled and scarlet portions of the face. She wore the plaster on the face four or five weeks only, and on the neck seven or eight.

TUBERCULA CONNECTED WITH SYPHILIS.

Tubercula, or what is called scrofula, sometimes assumes the most malignant form, after the long continued use of mercury in chronic diseases, including syphilis; hence the name Mercurial Disease. It frequently assumes the same malignant form, after the absorption of the syphilitic virus. The following notice of it under this form, and of the common remedies for it, is extracted from a lecture delivered by a distinguished professor in one of our medical colleges.

“The next point connected with scrofula that I shall mention, is its catenation with syphilis. It is my firm impression, and one too, that I have not failed to impress on the minds of my students ever since I have been a teacher—one that I have not hesitated to promulgate in writing and in debate—that most of the constitutional symptoms of syphilis depend on the inoculation of this disease in a scrofulous constitution. For many years I have had this subject impressed on my mind. I have examined with care, every case of this disease that has occurred in a laborious practice. I have enquired into the previous history and circumstances of the unfortunate beings who have fallen victims to the fell destroyer. I have looked at every case of this disease transplanted into a strumous diathesis, with peculiar attention, and I do not hesitate to assert, that when a scrofulous patient presents himself before me, with even a common chancre, I consider his death warrant signed and sealed. He may, it is true, linger on a

miserable life, disgusting to himself, and loathed by his friends ; but even if his life be spared, what is he but a miserable, emaciated, deformed, wretched being, **BEYOND THE POWER OF MEDICINE**, capable of indulging in no hope, but that of a speedy death, and the early death of such an unfortunate, is a relief from misery and despair. And who are the victims to this unenviable conjunction ? Who are the young men that fall victims to the union of this disease with scrofula ? Alas, it is among the young, the talented, the manly.

“ Too often have I seen young gentlemen, whose early mental developements, whose just and fair proportions, whose general character for scholarship and accomplishments, have rendered them the delight of their friends, the hope of their parents and their country, cut off by their own imprudence. And those too, are the very men, that are most easily led away, young, ardent, and enthusiastic.

“ It is for the scrofulous, for the young, for the talented, for the beautiful, that the snare is laid, and many a physician can testify how often they have followed to the grave the blighted hopes of parents, in the persons of those, who have by imprudence and dissipation, wrought out their own destruction.”

The importance of this subject to those who are interested in it, has induced me to make the above extracts, and to observe here, that the natural remedies, or those called the *magnetic pills and plaster*, cure the disease most thoroughly and permanently in all the forms above noticed ; and that in many cases, in the higher circles of society, where the disease in these forms has descended from parents to their children, they have saved their lives, and the reputations of whole families from one common ruin.

The symptoms of the disease, when connected or complicated with syphilis, by the absorption of the syphilitic virus, and also when it is produced by the absorption of mercury, and called mercurial disease, are the same as other forms of tubercula, and consequently require the same remedies ; and the same rules should be observed, both in distinguishing these forms, and in using the natural remedies, as in the common form of the disease.

It is only necessary to add, that when from the absorption of the syphilitic virus an ulcer is formed, called a chancre, and when the inguinal glands become tuberculated—no matter by what name they are called, or one of these are softened down, and produced one or more abscesses there, or when any other part of the system becomes tuberculated, or abscesses, ulcers, or caries of the bones form from this cause, the same symptoms will be presented on an examination as in tubercula of the organs and limbs, and the above remedies should be used in the same manner, and the same rules should also be observed, as in other forms of tubercula.*

* Twenty-eight very bad cases of this form of the disease have been cured with these remedies, during the last three years, and I have now five under treatment, and not a solitary case of their failure in this form of the disease, in any of its stages, has come to my knowledge

From the Christian Secretary.

HARTFORD, OCT. 30, 1840.

MR. EDITOR,—I send you a brief statement of facts relating to my recovery. This is done the more cheerfully, as I feel prompted by gratitude and by a desire that others similarly afflicted, may be as happily relieved.

I had been dyspeptic for many years, was afflicted with tubercula of the palate, neck and stomach ; with chronic diarrhœa and piles ; with general debility, and with chronic bronchitis, which extended from the glottis to both lobes of my lungs. During the last two years I have suffered so much from bronchitis that much of the time, speaking even in a whisper, has been so distressing as to oblige me to converse by writing. But now I am comfortably well, through the Divine blessing, on the use of Dr. Sherwood's Electro Magnetic Remedies. Some of the delightful changes experienced by me are the following :

From such a state of my throat and lungs that the utterance of a sentence distressed me, I have been enabled to preach eleven times during the present month, and conduct five other religious services. My strength and comfort have been, in the meantime, gradually increasing. The deep depression of spirits which, at times, seemed death-like, has given place to the animation and cheerfulness of youth. My blood, from having been almost literally black and thick, has become perfect in color and consistence. My palate, through the aid of a slight surgical operation, is reduced to its usual size. The glands of my neck, which were enlarged and painful, are now entirely reduced. The pain from my neck has passed off sensibly. The mucous membrane of the bronchia has been aided in its secretions. Dr. Sherwood's remedies have excelled every thing I have used as an expectorant. The inflammation of my throat, and the pain consequent upon it, have been allayed, and at times entirely gone. The same is true of the inflammation and pain in my bowels. Relief from hunger, by eating, though more immediate, is not more a matter of consciousness, than was my relief from pain, by the application of these remedies. From apprehending languor, consumption, a suffering life, and an early death, I have now the prospect of an active, and I hope, useful life.

To all afflicted with bronchitis, or tubercular consumption, or what is called scrofula, or dyspepsia, let me say that I do not believe that these diseases can long exist under the action of these remedies. They are not, in my estimation, to be classed with quack medicines, because, 1st, I believe them to have science for their basis. 2d. Their adaptation to individual sufferers is pointed out by symptoms which none need mistake ; and 3d, Dr. S. is a regularly educated physician, who, having suffered from his childhood, was led gradually to the discovery of them for his own relief. Some think it a mark of wisdom to ridicule every thing new in medicine ; as if the science and practice of it were stereotyped, however the Baconian philosophy repudiates the theories of every age and school which come in conflict with fact. I have stated simple verities. In addition to my own case, I refer to B. S. Lawson, M. D., of Cincinnati, who was

restored from confirmed consumption, after all the common remedies had entirely failed.

With gratitude to God for my recovery, I subscribe myself

Yours,

J. B. Cook.

P. S.—I should add that Professor Bronson gave me essential aid in recovering the use of my voice.

The *Bronchitis* mentioned in this case was the consequence of tubercular disease of the throat and lungs; the reduction of which dissipated the disease of the mucous membrane of the throat and bronchial tubes.

I did not see Mr. Cook until he had taken one box of my remedies, when I suggested the necessity of his consulting Professor Bronson on the subject of the improvement of his voice, which I am pleased to learn has added another case to the Professors long list of triumphs in his art.

This disease is very common among Clergymen, and is the consequence of taking cold after over exertion of the organs of the voice. The throat becomes tuberculated, the uvula enlarged and elongated, and the mucous membrane which lines the inside of the throat, and covers the tubercles, becomes diseased, thickened and florid, in consequence of the tuberculations; and this affection, the novices of our profession call *Bronchitis*, and treat it as such. The disease is subsequently propagated to the lungs, and these Clergymen descend to their graves, the victims of the abominable quackery which has so long disgraced our profession.

This disease in the throat is distinguished in an instant, as it is in every other organ, by the magnetic symptoms, and yet the professors in our medical colleges continue to teach and practice the old astrological symptoms.* It is now many years since I first attempted to direct the attention of some of these gentlemen to the frequent cases of tuberculated brain disclosed by these new symptoms. They were all, however, perfectly incredulous, in regard to their existence in the brain, in consequence of never having discovered them in that organ by those ancient symptoms to which they were accustomed, and which they had been taught to believe were infallible, and I was consequently compelled to continue to labor alone in the dissemination of a knowledge of these new and unerring symptoms; but "truth although crushed to the earth will rise again," and I now have the pleasure of introducing to the notice of the gentlemen referred to, and all others whom it may concern, the following article from the London Medical Gazette, for February, 1842, on the existence of tubercles in the brain.

* These professors, like the ancient astrologers, who were physicians, priests, and astronomers, pretend to distinguish chronic diseases by feeling the pulse, the aspect of the urine, and the odour of the stools, &c. &c., and they will continue to teach such nonsense as long as it is of any value in their market

TUBERCULA OF THE ORGANS AND MUSCLES

Mrs. C. A. W. No.— Street, New-York; light complexion, and aged 20 years. I called to see her, at the request of the Rev. Mr.— July 5th, 1842; and, on examination, found her affected with tubercular disease of all the organs, including the brain. It had also extended to the muscles, rendering it altogether one of the most deplorable cases I had ever seen. The disease commenced in the uterus, about four years before; and, under the common treatment, was gradually propagated to the other organs in succession, and, at length, to the muscles, when her strength succumbed, and she was confined to her bed. Her physician, an eminent man, after having exhausted the vast resources of the *Materia Medica*, aided by bleeding, cupping, leeching, blistering, and *issues*, along the spinal column, now apprised her mother and family of the futility of all “earthly” remedies in the case, and of the propriety of her preparation for another world; stating that, in the meantime, all that could be done for her was to keep her as comfortable as possible, until the closing scene.

The flexor muscles of her legs, soon began to contract; and, in a few weeks, she was unable to stand on her feet. Her command over the muscles of her face, also gave way; so that the least cause of excitement, such as that of a stranger entering the room, would produce violent spasms, and horrible contortions of the countenance, and it was in this deplorable state Mr.— found her, when, as a last resort, he was called to administer to her the “spiritual,” potent, and all pervading influence of magnetism! He commenced, by making passes from her head to her feet, and continued them about half an hour; repeating them daily during one week, with manifestly great effect upon the muscles, though without producing sleep. Her own statement is that, “When Mr.— began magnetising me, only one week since, I did not anticipate much, if any, relief; but am now, with my friends, perfectly astonished at its beneficial effect upon my system. Besides curing me of the spasms, my limbs have become straight; and I am so far recovered that I can now walk across the room.”

On examining her spine, I found it everywhere excessively tender, and prescribed the magnetic remedies. Having removed the beans from the Doctor's *issues*, and applied adhesive plaster to heal the wounds, the magnetic plaster was placed over all, the whole length of the spine, and a pill ordered to be taken regularly, morning and evening. The disease rapidly yielded under the use of these remedies; in three weeks, the patient was able to ride out in a carriage, and in five weeks had gained in weight nine pounds. By the time she had used two boxes of the pills and plaster, she had, apparently, entirely recovered her health; and her physician, on an incidental visit, after a long interval of absence, uninformed of the change of treatment she had received, was warm in his expressions of astonishment and delight at the restoration he beheld, and of encomium upon the efficacy of the *issues* which had long been abandoned, and existed only in imagination and memory.*

I have been thus particular in describing this case, for two reasons: first, because I wish to suggest to those who use these remedies, the propriety of aiding their action, *in cases like this*, by manipulations, as practiced in this instance; for I have no doubt, from what I have seen of its effects, in this and similar cases, both before and after the commencement of the use of these remedies, that the lady of Portland Me. mentioned in page 89, would have recovered her health, in less than half the time there stated, if she had been magnetised, a few times, either before or after she began using them. *The magnetic organization of the different parts of the system, is necessarily very much deranged in such cases*, and the natural action of the remedies thereby retarded; but when this derangement receives a strong tendency to adjustment, in the manner suggested, their action is more prompt, and the progress of the cure more rapid. And, secondly, because I wish, in connexion with this case, to present my due acknowledgements to a great number of distinguished physicians in this city, for the enthusiastic commendations they have often awarded, as in this case, however unconsciously and unintentionally, to *my* remedies and treatment, while their excited imaginations have been under the magnetic influence of the pleasant delusion that the happy patients were recovering entirely from their own.

* The doctor, as I am well informed, soon succeeded in persuading four of his patients to submit to the use of *issues* along the spine, by his marvelous descriptions of their effects in this case!

From the *Western Lancet*, Cincinnati, O.

CASE BY C. B. GUTHRIE, M. D., of Granville, Ohio.

The case is that of a young lady, twenty-three years of age, of healthy parents, and herself healthy until about fifteen. The disease now is evidently located in the *medulla spinalis*. It seemed to fix itself upon this point about three years since, after she had suffered from various other forms of disease, and has now for that length of time remained stationary. Whether the lesion is organic or functional, I am not prepared to say. The symptoms now presented are the following: More or less continual headache, with now and then slight amaurosis. Tenderness along the spine, with loss of power in the motor nerves of that side, extending to the knee and elbow: this is not complete, but partial, accompanied by excessive *sensibility* of the parts. This sensibility is such, that she cannot bear the slightest pressure upon that part of her body. It does not stop at the sense of touch, but is such that she is able to detect the approximation of the hand of another, though not in actual contact. By repeated experiments we have demonstrated the fact, that she is able to detect the *presence* and *position* of the hand of another, when brought within *two inches* of that part of the body thus sensitive. She describes the sensation as sharp and lancinating, and following the motion of the hand, and ceasing soon after its removal.

I have repeatedly tested the thing, both outside of her ordinary dress, and without it, both with the same result, except that the intervention of any substance diminishes the pain. Her clothing after a short time, ceases to affect her thus; and I am not able yet to determine whether or not an inanimate substance affects her at all, except by its weight or tension; but I am inclined to the opinion that it does, to a very slight degree. There seems to be no difference in the presence of a conductor or non-conductor of electricity; nor does the state of the atmosphere seem to have any peculiar influence. I have witnessed, in her case, as well as one or two others, the existence of a state very similar to the somnambulatory state of the mesmeric patient. During an increased trouble of the nervous system, I have witnessed a total isolation from all that was passing around them, yet keeping up a conversation, rational, and sometimes in most beautiful language, with some unseen being. The senses of touch and taste remained in their normal state, while the others seemed almost oblivious of their functions. Music, or any continuous sound, sometimes produce some effect; but there was no appreciation of distinctive sounds.

I have, to a slight degree, also witnessed the phenomenon spoken of by Marshall—pain occasioned by passing the hand over the surface from the sternum to the spine, while the passage of the hand from the spine to the sternum occasioned rather a pleasant sensation. This I have recently witnessed in a young man, affected also with disease of the spine.

This young lady's case has gone through the whole routine of legitimate treatment, having always been under the care of a regular physician: she has never been *quackised*, as most of such are. She is possessed of no ordinary mind, highly cultivated: of deep religious feeling; cheerful, happy, and perfectly resigned to her situation; in short, just one for whom a physician feels that they deserve a far different fate, judging only from our finite appreciation of the things that pertain to life and happiness.

Thus I have given you the anomalous features of the case. There are other symptoms, but they tend to demonstrate the seat of the trouble, more than to elucidate the mysteries of its phenomena.

Let me ask a few questions, suggested by this case. Is there a *nervous fluid*? Has it a regular circulation? Is this increased action of the sentient nerves, with the loss of power in the motors, any evidence of a disturbance of this circulation, or of its loss of equilibrium? If there is organic lesion of the medulla spinalis, why have we this increase of power in one set of nerves, while we have loss of it in another?

The continued presence of the hand occasions great disturbance of the motor as well as sentient nerves. Why? Does it take off electricity? I can discover no evidence of the existence of this fluid. Is it not much more like the galvanic, or magnetic fluid, than like the electric? What it is seems yet to be a matter of doubt; but my own impression is, that the diseases of the nervous system must soon be referred to something more than *irritation*, and treated by something more than *counter irritants*.

C. B. GUTHRIE, M. D.

Granville, O. Jan. 7, 1843.

MONTGOMERY, ORANGE CO., N. Y., 17th April, 1844.

Dr. H. H. SHERWOOD.

My Dear Sir,—I was called on the 20th of February, 1842, to visit T. K., of Ulster County, in this State. He was a young man of sanguine temperament, good physical and mental endowments, and up to the time of the present sickness, had enjoyed uninterrupted good health. He was 18 years of age, and by avocation a farmer.

His illness commenced Sept. 3d, 1841, with swelling in the left knee, and after a few weeks in its fellow also, both joints being very painful. These swellings continued for a few weeks and then subsided, leaving stiffness, languor, &c. Seven weeks after the swelling of the knees had subsided, the shoulder and hips became similarly affected. Chills, fevers, and headaches immediately followed. The family physician being called pronounced the disease *Rheumatism*, and placed the patient under the usual antiphlogistic treatment. Notwithstanding this, however, the disease continued, but was erratic in its character, sometimes attacking the chest, then the head. In July, the throat and tongue became swollen, pus formed under the tongue, afterwards the chin, and then the cervical glands swelled and suppurated. The pain in the left knee and hip at length gave way to counter irritation, blisters, &c., and from the use of porter, the strength gradually augmented, enabling him to sit up. But thus far the use of the left limb was not recovered; at the same time, at this period, great tumefaction and edema took place; in this state bandages were applied, and in September the formation of pus was discovered; on the 15th, the abscess was opened, by incision in the thigh, about midway, on the outside; on the 23d, another abscess which had formed on the opposite side broke; on the 20th of October he was again able to sit up, and on the 1st of November, could walk with the aid of crutches.

On the 15th of November while walking he had the misfortune to fall, by which the thigh was fractured 6 inches above the knee. As a matter of course, the limb was placed in splints, the ulcer continuing to discharge.

About the 1st of January, 1842, the patient exhibited all those symptoms that indicate the ebbing of the tide of life, and that usually follow suffering from a protracted and painful disease. He had a dry hacking cough, the hectic fever appeared, the frame was emaciated to a skeleton, and two additional abscesses had formed, and become running ulcers. The usual remedies of blistering, creating counter issues, and prescribing Iodine, Hydriodate Potassa, Extract of Sarsaparilla, Blue Pill, Spanish Rob, Swaim's Panacea, &c., &c., constituted the treatment until February, at which time I was called in.

When I first saw the patient he was subject to colliquative sweats, his cough was obstinate, and his pulse seldom varied from 120. The whole left limb displayed the presence of great tumefaction, particularly the iliac region. The tubercular character of the disease was plainly indicated by these symptoms, which were exceedingly unfavorable. He was also subject to great pain, which continued without any visible abatement, or interval of ease. Large doses of morphine were administered to quiet him, and as he and his friends remarked "to smoothe the passage to the grave." For 17 weeks he had not left his bed, the pain of moving being too great to be endured. He had availed himself of the services of several experienced surgeons and physicians, some of whom pronounced him beyond the reach of art.

From the condition of the patient when I was called in I felt the responsibility to be almost terrible; however I entered upon my duty, trusting for success solely on those principles, which for many years past you have been laboring to establish.

Upon a careful examination, I found the diagnosis to be tubercula of the left knee (white swelling), implicated with tubercula of left lung, liver, throat, heart, stomach and mesentery, accompanied with a total loss of appetite.

On the patient being placed under my charge, all former prescriptions were thrown aside. The diseased limb was bandaged smoothly from the instep to the knee, and wetted with a strong solution of Sal Ferri, Capsia, &c., at the same time fermenting poultices were applied to the thigh every evening. I prescribed a pill morning and evening, and covered the whole thigh with a plaster. I also

placed one on the lumbar region, to be taken off at night, however, and the poultice applied.

Under this the magnetic treatment, 12 days from its commencement, the appetite returned, the palpitations ceased, and the pulse assumed a healthy standard. In three weeks the cough and expectoration ceased, the tumefaction subsided, pus of a more healthy character was discharged, and in one week more the patient was able to sit up. In July he could walk with the aid of sticks, and continued to improve steadily. In December last the ulcers, four in number, gradually closed up, and swelling with some pain followed. To alleviate this, one of the ulcers near the knee was re-opened, and serous matter with exfoliation of carious bone was discharged.

Since the re-opening of the ulcer near the knee the patient has improved rapidly. At this time he is able to walk without inconvenience, and labor at his business, although not so well as before his illness. Indeed this was not to be expected.—The patient, when I was called in, was in an almost hopeless state, diseased in his entire system, and emaciated to a skeleton, therefore the cure must necessarily be very slow, almost as much so as is the growth from infancy to manhood. I have deemed it proper to be thus explicit, in order to show the error in judgment that occurred at the commencement of the disease, as well as the mistakes in treatment that followed. He owes his life to your remedies. *

A. H., M. D.

* P. S. These remedies are perfectly safe for persons of all ages and conditions, and are forwarded by express, or mail, to any Post office in the U. S. free of postage. One hundred and eighty pills in a box, with directions for their use, and will last a patient three or four months. Price eight dollars a box for the pills, and two dollars for the plaster. Physicians cannot manufacture them for the use of their patients; every attempt to do so must necessarily prove a failure, as the process of their manufacture is, and must always be, unknown to the profession, to insure uniform results from the action of these remedies.

H. H. S.

THERE are cases of tubercular disease of the organs of long standing, in which the reduction of the disease is sometimes very slow, as will be seen in the following case :

“PORTLAND, August 19, 1842.

“DOCT. SHERWOOD,

“*Dear Sir*—Having nearly closed the sales of the Magnetic Medicines you con- signed to me last season, I now forward to you herewith a check for the amount, and solicit a further supply.

“I have the pleasure to inform you, that your medicines have now acquired a high reputation here, to which I think them justly entitled; but I found it almost impossi- ble for a long time to get them into use, and, indeed, I do not know as I should have succeeded at all but for the happy effects they have produced in my own family.

“I will give you a few facts in relation to the case. The patient is a sister of Mrs Smith, and is now about twenty-six years of age. She has been sick seven years, and for the last six years of the time, was wholly confined to her bed. In the first place, her spine was considerably affected; her heart was also diseased, as indicated by violent palpitation, alluded to in your book, under the similitude of churning, and attend- ed with a sensation described by her as of a large substance rising in her stomach and throat, and distressing her at times almost to suffocation: her stomach was also dis- eased, as we suppose, from dyspepsia, insomuch that for several years she was wholly unable to taste bread or meat, or even gruel, without producing the most excruciating torture. During all this time her diet consisted almost exclusively of potatoes, being found to produce less distress than any other food. And, in addition to all these, she was much diseased also in the mesenteric system, or the uterus, or some other organ in that region—her bowels became swollen to an unusual and alarming degree, and remained so constantly for over three years, during all which time she was unable to pass a drop of water except by means of an instrument. During the whole time of her sickness, she has been attended by some of our best physicians, but without any prospect of relief. You will readily imagine that her sufferings, under the circum- stances of her case, were severe, but the extent of them cannot be appreciated. On receiving your medicines, I immediately put her upon a course of them, and she took up two boxes, without any apparent change for the better, but I induced her, though reluctant, to persevere, and, soon after commencing the third box, she began to im- prove rapidly, and when she had finished it, she was able to sit up nearly all day, and to eat almost any kind of food without distressing her; the palpitation of the heart was gone; her spine was much better, and the swelling and distress in her bowels were wholly removed, and the evacuations of the body had become easy and natural. She took a part of the fourth box of pills, and then suspended them, about two months ago, and is now apparently quite recovered from those distressing affections under which she has so long suffered; she is yet troubled, however, with a degree of paralysis in one limb, which has attended her through all her sickness, but this also is gradually getting better, and we are in hopes that she will soon be quite well of that also. Her case is notorious here, and her cure is regarded as almost miraculous, and by means of it, a market has been made for the most of the medicine I have sold; and I am happy to learn, that several others who are taking the medicine, are improving won- derfully under its operation. I, therefore, wish, if agreeable to you, to be kept con- stantly supplied with the medicine, and will make remittances to you at any time you wish for all that may be sold.

See p. 148.

“Meantime I remain, very respectfully,

“Your obedient servant,

“CHARLES B. SMITH.

CONSUMPTION.—In 77 deaths which occurred in our city last week, 9 were by consump- tion. In New York 33 perished by consumption in 179 deaths. We believe the propor- tion in New England cities are still greater.

According to a statistical paper which was recently read at Manchester, one death by consumption occurred in that town, out of every thirty-four families; in Liverpool 2 deaths out of every forty-nine families; in Birmingham, one death out of every thirty-six; and in London two deaths out of every one hundred-five. In the agricultural districts of England, the proportion of consumptive cases to deaths is four in every twenty-one; and in the fac- tory districts, three in every nineteen. The victims by this disease in every year must form quite an army of martyrs—many, we fear, martyrs to fashion; others to poverty, ex- posure, occupation, or climate.

It seems to us that, when we consider the immense mortality, and the few cases of resto- ration, little attention, comparatively speaking, is paid to this disease, its causes and cure, by the medical profession generally. Doubtless many have abandoned the possibility of cure, except in the early stages. But when victim is added to victim every hour—when all sexes, ages, conditions of life are swept away by thousands each year—more than ordina- ry attention should, in our view, be bestowed upon the subject, not only by physicians in- dividually, but by our medical colleges and universities.—*Philad. Inquirer*, 1842.

Alas! alas! the brains of the professors of these colleges and universities, are so cram- med with knowledge, there is no room for more.

CURATIVE EFFECTS OF MESMERISM.

A young lady of Ohio, about 18 years of age, who has been for some time at school at Hartford, Conn., received an injury in the lower part of her spine, in November last, from a fall, which rendered her unable to bear even the slightest elevation toward an erect position, and kept her in continual pain. She was attended by the most skilful physicians without benefit, but at length, under the advice of a physician of this city, she was placed on a bed constructed for the purpose, and brought here by railroad and steambot, with the view of trying the effects of mesmeric treatment under his direction. She arrived here on the 3d inst. (April, 1846), accompanied by her brother-in-law and sister, and put up at Judson's Hotel, Broadway. The following evening, the physician introduced Mr. Oltz, a distinguished magnetizer, and recommended him to make the proper mesmeric passes along the spine for the purpose of allaying the high nervous excitement under which she was laboring, and which had continued without intermission, from the time of the accident. The passes were quite effectual, and that night she enjoyed sound and refreshing sleep which she had not obtained for the previous five months.

The next morning, the magnetizer, by means of the mesmeric passes alone, gradually raised her to an erect position, in which she remained about a minute. In the evening he operated again, and she was again enabled to sit erect. The doctor then directed him to raise her upon her feet, which he did with a few passes; and, supported by the magnetizer and the physician, she found herself able to walk several times across the room. After resting about fifteen minutes in an easy chair, where her expressions of wonder and gratitude were deeply fervent and affecting, she repeated her walk around and across the room, and retiring full of joy and hope, again passed the night in tranquil sleep.

On the following morning, the mesmeric passes proved so effectual that she was considered sufficiently restored to undertake a journey to Philadelphia, that afternoon, on her way to her family in Ohio. Mr. Oltz accompanied her to the dépôt in Jersey City, and having seated her comfortably in the car, and stowed away her previous travelling couch upon the top, transferred his mesmeric power over her to her brother-in-law and saw her start on her unexpected journey. The following are extracts of a letter from the sister who accompanied her, to her physician in this city, dated Harrisburgh, Penn., April 13th, 1846:

"I fear our neglecting to write from Philadelphia will lead you to think we do not appreciate the kind interest you took in sister's case. Be assured we do and ever shall remember you with gratitude. * * * Our kind friend Mr. Oltz (to whom you will please remember us) doubtless told you how well we succeeded in getting to the cars. Mr. B. was able to continue the influence to such a degree as to keep her very easy for about two hours, when, owing to some relaxation of effort, she became sick at the stomach. We gave her the little globules [Ipecacuanha] which soon relieved that, and then, notwithstanding the noise and motion of the cars, Mr. B. succeeded in putting her into a sounder sleep than ever she had been in before, and she awoke from it quite refreshed. For two days after our arrival in Philadelphia she felt too weary for exertion; but on the third night, after being magnetized, she sat up for more than two hours and walked about the room for nearly an hour; she slept well for that night, and was next day quite comfortable. We left Philadelphia at half past seven in the morning, and rode nine hours over the roughest railroad in the country, but under the *magic* influence she was kept quietly asleep most of the time. She feels much fatigued and sore to-day, but is in good spirits at the idea of starting and the comparative ease with which the rest of the journey will be performed."—*New York Tribune*.

Besides the ordinary effects of an injury from a fall in this case, there was great derangement in her magnetic organization which required the power of the magnetizer to restore to its proper condition and normal action, and hence our confidence in the success of the experiment and the rationale of its results.

TUBERCULAR DISEASE OF THE ORGANS AND MUSCLES.

Miss M. S. of Providence, R. I., aged 25 years. This young lady had been out of health about seven years, when she was placed under my care in May, 1845. She presented the external appearance of the most robust health; yet this was one of the worst cases of tubercular disease I ever saw; for on an examination, I found all of her organs, including the cerebrum, cerebellum and uterus, as well as all the muscles, in a very advanced stage of tubercular disease; accompanied often on retiring to bed with the most violent and prolonged spasms, terminating in insensibility and coma or sleep. The muscles of the body and limbs presented everywhere the same elastic and puffy state seen in the common white swellings of the joints and limbs. There was also great sensibility to pressure the whole length of the spine.

A clairvoyant examination of this case confirmed the above diagnosis, and besides located the disease in the cerebrum in the organs of imitation, marvellousness, hope, and conscientiousness of the left hemisphere; a matter of great importance in directing the passes in mesmerising and in the application of the buttons in magnetising. — Prescribed the magnetised gold pills and plaster, mesmerism and the action of the magnetic machine.

The following letter from this talented young lady will show the result of this practice:

Providence, March 9th, 1846.

DR. SHERWOOD. Sir:

I feel it a duty devolving upon me, to write you at this time. As regards my present state of health, I can say, I am well. During the past winter my constitution seems to have undergone a change; which change cannot be attributed to any other source than strictly adhering to your *practice*. I consider it a case worthy of note; for after having spent my "living upon physicians, and was nothing bettered, but rather grew worse," and all that were ever employed gave me no encouragement of ever fully recovering, after having experimented upon me until my patience was worn out.

Under my present state of health the whole creation seems created anew. I now begin to realize how many years I have spent in a disordered state of health, enjoying naught of life or its charms. I am now able to attend any public assembly without apparent inconvenience;—my head feeling as clear the next day as before. The *privilege* I think I know how to prize. My sleep is sweet and refreshing;—none of those long, dreaded nights, and anxious watchings, and fears. My gratitude I can never express, in being led to persist in your method of treatment.

I will endeavor to state as nigh as I can the origin and progress of the disease. In the spring of 1838, my health began to give out, a general weakness seemed to pervade my frame, and in the month of May was quite reduced with distressing pains in the lower part of my back, accompanied with spasmodic affections; employed a physician who immediately pronounced it a severe case of *spinal irritation*, and was put upon a mode of treatment general to their clique;—no relief was gained excepting short periods of repose, when the disease seemed to be preparing to break out anew, until it seemed to extend to all parts of my system, and for seven years I have been going on in this way, employing other physicians, but all to no purpose. When I recall the nights and days of suffering with my head, it is more a wonder that mind has kept her throne. I say not that my mind has not suffered from the shock, but enough of reason is left to know from what source I at last found relief.

I have stated what was then considered the source of so much trouble, but since applying to you, find that an *organic affection* in the lower part of my body must have been the primary cause of so much pain in my back and head.

I commenced the use of your remedies the early part of May, 1845, and used two boxes of pills, and the magnetic machine and plaster, and am now enjoying more of life and better health than I had previously, for eight years; this is not only my testimony, but of friends who have seen me most, and it is a wonder to them that I am where I am. I am now 26 years of age, and feel younger than I did at 18. I know my recovery is attributable to the thorough use of your remedies; and if my recovery can be of any assistance to others similarly affected, use it as far as you think proper.

Swelling or thickening of the Muscles—Rheumatism—Effects of Magnetising upon the Magnetiser—Dizziness—Cold feet and hands—Neuralgia—Tic Dou-
loureux.

We probably receive, on an average, fifty shocks a day in magnetizing our patients, either from accidentally touching the unprotected parts of both buttons, or from touching the patient with one finger and a button with the other, and were at first much alarmed at the consequences that might result from it. We have been, however, not only happily disappointed in our expectations of injury, but have found it a great benefit to us. It has removed every vestige of chronic rheumatism with which we have been much affected during the last fourteen years.

We never had so much elasticity in our body and limbs, and never had so much strength; we never walked with so much ease as we now do; and besides, we frequently, even after having gone through a great labor during the day, feel so much elasticity and buoyancy that it is rather difficult to sit or stand still, from a strong inclination to be moving, jumping, or dancing; these sensations are in fact sometimes so strong as to require great efforts to repress them.

Persons affected with rheumatism, and especially those in the decline of life, are more or less subject to turns of dizziness, which sometimes compel them to sit or lie down suddenly, to prevent them from falling; and we had been much affected in this way. But these premonitory symptoms of palsy have entirely disappeared with those of rheumatism; and we have removed these symptoms in many other cases, by magnetising the brain—a practice much more simple and effectual than the old routine practice of the schools. Those who are affected with rheumatism are very subject to colds, and to cold feet and hands.

A great number of the cases of head-ache, are those of rheumatism affecting the muscles of the head, and the membranes of the brain; and the muscles of the face are affected with rheumatism under the names of Neuralgia and Tic Douleux; and those of the heart under the name of hypertrophy of the heart. Many of the cases of vacillating pains about the chest—of the front, right, and left side, along the pectoral and intercostal muscles, are cases of rheumatism, often mistaken for disease of the lungs. These cases are all distinguished in an instant by the pain produced by pressing with the thumb and finger on the intervertebral spaces of the middle and back part of the neck, the intensity of which increases with the intensity of the disease; and physicians, on commencing the practice of the magnetic symptoms, are often surprised to find the great number of cases of rheumatism—of tubercular disease of the muscles, as well as of the organs.

The negative and positive surfaces of the facia of the muscles are both equally affected in acute rheumatism, and the affected limb or limbs are consequently paralysed; and in chronic rheumatism, the positive surface of the facia in which the motor nerves terminate, is more or less effected, and the motion of the limb or limbs more or less impeded, and hence the necessity of using positive as well as negative medicines, or combinations of positive and negative medicines, in many cases of this disease. The uncertainty in regard to the extension of the disease in the different surfaces, relatively to each other, necessarily makes the true remedy for any given case uncertain, so that it may be necessary in some cases to try one, two, three or more, before we find the right one. Medicines of any kind in this disease, are, however, only palliative; they rarely cure it permanently, excepting only the magnetised gold pills.

Rheumatism.—R. Magnetised gold pills and plaster—Magnetic machine.

Rheumatism.—R. Rhus Tox. 5 to 10 globules once or twice a-day during 2 or 3 days.

Rheumatism.—R. Nux v. 3 to 5 globules once or twice a-day during 2 or 3 days.

Rheumatism.—R. Tinct. or Vin. Colchicum, ℥j. Dose from 5 to 30 drops, according to the age of patient, 2 or 3 times a-day.

Atrophia Rheumatica—Atrophia of the muscles—Chronic mucosis of the muscles—
(Chronic disease of the negative or mucous surfaces of the fascia of the muscles.)

In atrophia rheumatica, or chronic mucosis of the muscles, they are always *flattened*, emaciated, and feeble. The disease, with the emaciation, pursues its course in the most quick manner, without pain or other disturbance in the muscles, excepting only *aching* sensations from overdoing, or changes of temperature. Like chronic cerosis, hypertrophy, or tubercula of the muscles, it is often produced by frequent changes of temperature, and is often complicated with this disease, and is sometimes the sequel of it.

The most appropriate and successful remedy in this disease is a pill made from the following formula :

R. Hard Bal. Copa. and Cubebs ʒiiss. Ext. Hyos. ʒss. Make 100 pills.

One of these pills should be taken after breakfast and another after tea every day, excepting in cases where it is complicated with tubercular disease, when one after breakfast, and a magnetised gold pill after tea should be taken in place of the above.

When we find that in the case of tubercula of the muscles, the tuberculations have disappeared, as evinced by a flattening and emaciation of the muscles, the magnetised gold pills, or other remedies for tubercula, should be discontinued, and the above pills for atrophia substituted in their place.

The same course should be pursued in cases of tubercula of the heart, or uterus, as they are muscular organs. Clairvoyants, who distinguish these different states of the muscles, and of the organs, can tell when we should use one of these different remedies, or both of them at the same time. If the process of cure should be very slow in cases of atrophia, Phosphorus may be given once a-day (5 globules) during 5 or 6 days, when they should be discontinued a few days, and then repeated, if the urgency of the symptoms require it.

The above medicines, with the daily use of the Magnetic Machine, will be all the remedies that will be required in these cases of atrophia, excepting only those that are in the last part of the last stage of the disease, when medicines of any kind will be useless.

These cases of atrophia of the muscles or organs are comparatively very rare, being in the proportion of about one to 49 cases of tubercula of the muscles or organs.

Royal Medical and Chirurgical Society, Jan. 25, 1842.

Dr. WILLIAMS, President, in the Chair.

On Tubercles of the Brain in Children, with a Tabular View of 30 cases of the affection.—By P. HENRY GREEN, M.D.—(Communicated by Dr. T. H. BURGESS.)

An analysis of 30 cases of tubercle of the brain is laid before the society by the author, preparatory to a more extended communication on this subject, which he promises to afford.

After noticing the importance of extended post-mortem researches, with a view to the pathology of the brain, so as to comprehend lesions of the medulla oblongata, he concludes with some general remarks on his Tabular View. In his 30 cases the ages, he observes, varied between 19 months and 12 years.

With respect to sex, 14 were boys, 16 girls.

In *four* cases no cerebral symptoms existed during life; in two, only periodical head-ache; in two, deafness and purulent discharge from the ear. In the remaining cases, head-ache, vomiting, amaurosis, convulsions, weakening of intellect, were observable; the duration of this chronic state varying from *one* month to *three* years.

Nine died with acute hydrocephalic* symptoms, a few with symptoms of softening, the rest of consumption, small pox, &c.

The number, volume, and site of the tuberculous masses, varied considerably in different cases.

A discussion took place, relating chiefly to the degree in which the pathology of tubercles in the brain was known in England; Dr. Addison, particularly, stating that he believed the disease was so familiar to practitioners, that in many obscure chronic affections of the brain, it was almost confidently expected that tubercles would be found either in the substance of the brain or its membranes.

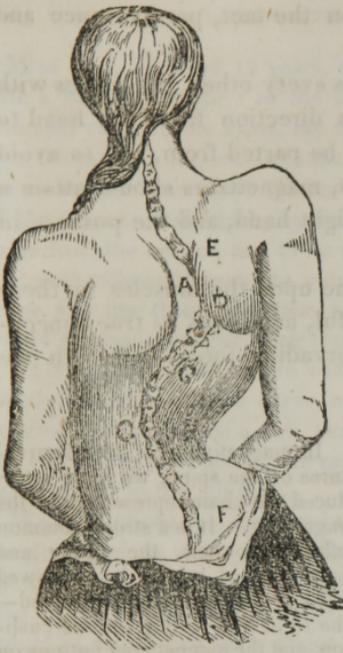
These are all cases of children. The disease in the brain is besides very common in adults, as I always have cases of it on hand, which yield to the influence of the magnetic remedies, as it does when affecting other organs. Very little, however, is known of the pathology of tubercles in the brain in this country. There are even professors of the theory and practice of physic in our Medical Colleges, who have often exposed their ignorance by denying the existence of tubercular disease of the brain, except in extremely rare cases.†

* Dropsy of the brain.

† NOTE.—In a post mortem examination in this city, a few months since, in a case where hemorrhage of the brain had been so great from tubercular disease as to fill the ventricles and cover its inferior and superior surface, one of these sapient professors declared the brain to be in a healthy state, and a case of tubercular disease of the brain exceedingly rare.

CORONER'S OFFICE, Friday, July 29, 1842.—CASE OF CONGESTION OF THE BRAIN.—The Coroner held an inquest this morning at the house of the deceased, corner of the Seventh avenue and Eighteenth street, on the body of Christian Flynn, a native of Germany, aged 31 years. The deceased, though usually healthy, was subject to severe attacks of headache, frequently producing violent fits. Being seized with one of these on Thursday night, 11½ o'clock, he died half an hour afterwards. Dr. J. B. Kissam, who had attended him, executed a post mortem examination on the deceased, and found the scalp and surface of the brain much congested, the latter slightly softened. At the base of the skull was a tumor of the size of a hen's egg, pressing upon the vessel returning the blood from the brain, the pressure of which tumor produced absorption of the bone to the extension of about a square inch. On removing the tumor and examining the cavity made by the absorption, some clots of blood escaped from beneath the tumor. The immediate cause of death was congestion of the brain, caused by the pressure of the above mentioned tumor interrupting the return of blood from the brain. Verdict accordingly.

LATERAL CURVATURES OF THE SPINE.



We have had 67 cases of lateral curvature of the spine from the 1st of April to the 8th of October, 1844, in which there was a great variety in the form of the curves, and a great difference in the time since they commenced as well as of their ages. The time of their existence was from 1 to 28 years, and their ages from 8 to 53 years.

The time required to straighten a spine, or make it resume its natural position depends so much upon the circumstances attending each individual case, as the form of the curve, the time of its existence, and the health of the patient, &c., as to make it necessarily very uncertain.

The first object to be obtained is to lessen the action of the tuberculated muscles on the posterior side of the curves, and increase it in the paralyzed muscles on the other, to enable us to make the spine pass the centre and curve in the opposite direction, *under the action of the buttons.*

When the object is attained, and we can make it pass the centre at each sitting, the muscles will soon maintain it in its natural position. In twenty-two cases in which the curvatures had existed from one to two years, they passed the centre at the first sitting, while it has required more than two months to effect this object in five cases of long continuance. The muscles are always swelled, thickened, or tuberculated on the posterior side of the curve (as seen in the engraving), and emaciated or atrophied and paralyzed on the other. In magnetizing these cases the positive button is placed over the paralyzed muscle at B, while the negative button is passed over the tuberculated muscle in the right shoulder, E D, and hip F, at intervals from 6 to 15 minutes; in the meantime the *negative* button is placed over the tuberculated muscles at C, while the positive button is moved over and around the left shoulder along the inside of the curve at A, under a power of the instrument that can be easily borne. Some of these bear only a moderate, while

others will bear its full power. We commence with a moderate power at each sitting, and then gradually increase it to the full power that can be borne, bringing the spine up as straight as possible at the close of each sitting. In some bad cases assistance is required to raise the atrophied shoulder and keep the paralyzed muscles distended under the action of the buttons, much however will depend on the tact, perseverance and experience of the magnetizer.

In magnetizing in these cases, as well as every other, the passes with the buttons should be downwards, or in a direction from the head to the feet, and this is a rule that should not be parted from, and to avoid mistakes in the use of the different buttons, magnetizers should attain a habit of taking the negative button in the right hand, and the positive in the left.

The effects of the action of the Machine upon the muscles in these cases, is most extraordinary, most wonderful, and gives us true conceptions of the unlimited power of the all pervading forces by which we obtain such results.

Magnetizing in Lateral Curvatures of the Spine.

Drawn and Engraved from a Daguerreotype.



In magnetizing for lateral curvatures of the spine, we have introduced the chair represented in the engraving. It is a strong common office arm-chair, the upper and back part of which being sawed off, and the front part cushioned—the right arm resting on one cushion, and the magnetising buttons on the other. A loose cushion is crowded into the space on the right side, and a strong gallon glass bottle placed upon it; when the young lady with a right and left spinal curvature—or having the upper part of the spine curved to the right, and the lower part to the left side—is drawn over the bottle by an assistant, in the manner seen in the figure, and the buttons applied in the usual manner, as described in pp. 60, 61.

In this case, it was eight years since the curvature commenced: and there was, as usual, a large white swelling of the right scapula, or shoulder blade, which drew the spine under it.

On the 23d time we magnetized this patient (May 17, 1845), the white swelling being greatly reduced, and the atrophied or emaciated muscles on the opposite side much thickened, the spine passed the centre, under the action of the machine, and began to curve to the left side, as seen in the figure.

The most prominent part of the white swelling was of a dark red color, pro-

duced by the heavy brass corsets the young lady had long worn, which was consequently shown in the daguerreotype.

We have here presented, in the plainest manner, the extraordinary phenomena of the reduction of hypertrophied muscles on one side of the spine, and the thickened atrophied muscles on the other, by the action of the machine *alone*, directed by a scientific and easy application of the buttons.

LATERAL CURVATURES OF THE SPINE.

Miss E. L. H., aged 19 years, called upon us on the 15th of March, 1846, with a lateral curvature of the spine. The posterior part of the upper and principal curve in the spine, lay under the right scapula, and its deviation there from the median line was an inch and a half. It was about eight years since the curve commenced, which was now imbedded in a veritable white swelling of the scapula, and which, by the expansion of the muscles, gradually drew the spine from the median line to its present position. We prescribed the magnetized gold pills and plaster to reduce the white swelling, and directed her to go home and use these remedies, and return here on the first of June, when I would commence magnetizing the spine.

On an examination at the end of this time, we found the white swelling greatly lessened, and the curve reduced one-half. We now commenced magnetizing the spine once a-day, and on the third day brought it up to its place, and on the fourth it passed the centre under the action of the machine, and began to curve to the left side.

We magnetized this case twelve times only, when the curve being reduced to one-fourth of an inch, we directed the young lady to go home and resume the use of the pills and plaster, and to continue their use until the white swelling was entirely reduced, when the spine would resume its natural position, and would be maintained there under the healthy and natural action of the muscles.

We have had more than a hundred cases of lateral curvature of the spine during the last three years, every one of which was connected with a white swelling on the posterior side of the curve.

The true cause of lateral curvatures of the spine is not understood by the profession; they are *always* cases of tubercular disease of the muscles of the spine. The tuberculations, or white swellings, are always on the posterior side of the curve, and produce the deviations of the vertebræ. The obvious treatment, therefore, is first to reduce the tuberculations, when the vertebræ will return to their proper place of their own accord, and the muscles thus relieved and restored will retain them in their true position. Yet the regular quacks of our profession continue to recommend that such patients be harnessed with cushions, splints, and brass stays; but, regarding them as worse than useless, we always remove them.

The importance of the use of the magnetized gold pills and plaster, in these cases, will be seen in a case which we treated and published before we introduced the use of the magnetic machine as auxiliary to the cure.

CHAPTER XI.

LUGOL'S CLINICAL LECTURES ON SCROFULA.

LECTURE II.

Tubercles in different Organs. Modes of detecting them. Formation of Tubercles. its Independence of Inflammation.

Tubercles in particular Organs.—The consideration of this part of the subject belongs rather to Pathological Anatomy. The diagnosis of tubercles in particular organs, is very difficult at least in the first period of their existence.

When tubercles exist in the sub-cutaneous regions, the mere local examination of the part at once enables us to convince ourselves of their presence, although, as we have already stated, these morbid productions develop themselves gradually *without pain*, and without swelling of the surrounding parts, in a word without giving rise to any perceptible phenomena.

When therefore we consider, that sub-cutaneous tubercles only become manifest during the first stages of their existence, because they are external, we can easily understand how it is, that in the mediastinum and the parenchymatous organs, this source of diagnosis being closed, it should be, always difficult, and *often impossible* to recognise their presence.

Tubercles may exist in parenchymatous organs, may even partly *annihilate them*, without their existence being revealed by any external symptoms; or if they are discovered it is at an advanced period of their existence, when they have so far progressed that treatment is no longer of any avail. In such cases it can scarce be said that the malady has been recognized during life; they belong in reality to Pathological Anatomy.

Our want of success in the use of the ordinary means of diagnosing, tubercles, proves that those means are inadequate, that we follow on erroneous course in our investigations, and that we must resort to new modes if we wish to be successful.

When pulmonary tubercles are suspected, we resort to auscultation and percussion, but in many cases these fail us, even when numerous tubercles are disseminated through the lungs, and for this reason it is that many physicians, after having greatly exaggerated the value of the stethoscopic signs, now declare them of little value, at least during the first stages of the disease. There is here another mode to which we may resort, induction; for instance, a patient complains for some time of slight pain and uneasiness in the thoracic cavity, we resort to auscultation and percussion, the resonance of the thorax is every where normal, pulmonary expansion free and easy, respiration perfectly natural, and guided by these data the physician declares that there are no tubercles in the lungs. But *he is deceived*, the method of investigation which he has followed has been inefficient. If we consider that the patient is born of tuberculous parents, that he has lost brothers or sisters from phthisis, or that they are suffering from cervical tubercles, white swelling or other scrofulous affections, that his health is delicate, his growth has been deficient, in a word if we consult with care antecedents and coincidences, we shall acquire the conviction that his lungs contain tubercles, although *auscultation is powerless, to demonstrate their presence.*

One of two things happens, either auscultation agrees with the data furnished by induction, then it affords a valuable concurrent testimony, or it disagrees, and then I

think we should follow induction as less likely to deceive us. Especially would I rely on the evidence of hereditary taint.

Tubercles in the Brain.—Out of four cases in which tubercles were found in the brain after death, there were two in which symptoms were noted which might be referred to their presence, but in the other two, though the lesions were more serious, no signs revealed the tuberculous disease. In one of these cases the left hemisphere had nearly disappeared, being replaced by a cyst filled with tuberculous matter. It is remarkable that the brain should undergo such extensive alterations *without any external symptoms* informing us of the gravity of the lesions which had taken place in its substance.

It is equally difficult to ascertain the presence of tubercles in the cerebellum, in most cases indeed their existence is *not even suspected*. M. Lugol has met with several instances in which tubercles as large as a *walnut or a horse chesnut*, have been found in the cerebellum, in subjects who presented during life no indication of encephalic disease. One of the cases he relates in illustration of this fact, is interesting in a physiological point of view.—A young girl, though 17 years old, presented no indications of puberty, the breasts and genitals were completely rudimentary. The head was always thrown backward and it was only by an effort of the will that it could be brought forward.

M. Lugol has seen tubercles in the tuber annulare, (pons varolii, *l*, fig. 4) without any symptoms.

Tubercles in the Lungs.—In the lungs, tubercles are so commonly met with that M. Lugol believes it to be a rule having very few exceptions, that they always co-exist in that organ with other scrofulous disease, if the patient have attained to the age of puberty. They may appear very early in life, and *obstinate cough in children* sometimes depends on their presence. The period of life at which they are most commonly developed is the few years after puberty. At this period we too often observe in scrofulous patients the terrible array of symptoms which characterize phthisis.

Puberty then is the time at which tubercles in the lungs most commonly appear, and this is a rule so general, that in the only three cases in which M. Lugol recollects having assured himself of the absence of tubercles, from the lungs of scrofulous patients of adult age, the organic signs by which puberty is commonly manifested were entirely absent. Scrofulous patients, however, occasionally advance in years, without any manifestations of tubercles in the lungs, and it happens sometimes, though rarely, that at that period the symptoms of scrofula gradually diminish and finally disappear entirely—but the pre-disposition still exists and the malady may return sooner or later. Sometimes the invasion of tubercles in the lungs is sudden, and their generation progresses with frightful rapidity. This form of phthisis is rapidly fatal. This may be assimilated to what occurs in the cervical region.

Tubercles in the lungs *follow precisely the same course as elsewhere*. At first disseminated in the tissue of the lung, they gradually converge as they increase in size, and uniting, form *tuberculous masses*. These when they soften and are evacuated, leave behind them *tuberculous caverns*, which are cavities in the substance of the lungs, the walls of which are formed by pulmonary structure or by what remains of the tuberculous matter. When a tuberculous mass empties itself into the bronchus and is rejected by expectoration, it constitutes a *vomica*. It is just possible that one of these caverns may heal, but even if they do, other tubercles remain, or if not, the pre-disposition to generate tubercle still remains, and in nearly every instance the patient will eventually fall a victim to the disease. These cavities become the seat of a more or less abundant tuberculous suppuration, this is of course absent till the tubercle has made its way into the bronchus. We shall here only allude to the exist-

ence of a tracheal, pleural or costal fistula, the history of these does not belong to our present subject.

On examining the lungs of a patient who has died with tubercles, we are often tempted to ask ourselves, why did not this patient, in whom so large a portion of the lungs is destroyed, and what remains is so compressed and condensed that it is no longer capable of receiving air, die of asphyxia? It is evident that they cannot be said to breathe by the lungs, for a long period before they die; now in such cases which of the organs takes the place of the pulmonary tissue? M. Lugol had no facts which authorize him to attempt an answer to this difficult question. The presence of tubercles in the lungs may coincide with an otherwise healthy state of the organs, indeed M. Lugol questions whether the lungs may not be healthy even in the advanced stage.

From all that has been said, it results that pulmonary tubercle is in fact but tuberculous scrofula. This is the position which the disease ought to occupy, and pathologists would never, in all probability, have attributed phthisis to inflammation if they had studied it as, *what it is*, a manifestation of scrofula.*

Tubercles in the Liver, Kidneys, Ovaria, and Testes.—The liver is often found to have undergone the fatty degeneration in scrofulous patients, but it is not often the seat of tubercles. They are rare in the biliary ducts, though M. Lugol has seen one the size of a large walnut in the cystic duct. They are more common in the spleen than in the liver, and when they co-exist in these two organs, those in the spleen are most advanced. M. Lugol has never seen tubercle in the pancreas. In the kidneys tubercle is common, it invades both the cortical and the tubular portions, and sometimes acquires the size of a walnut. There are seldom more than three or four. M. Lugol has seen tubercle in the ureters. He has only once seen it in the ovaries, when it co-existed with tubercle of the folds of the mesentery, the cerebellum and the lungs. Tubercles in the testes are not uncommon.

Tubercles in the Muscles, Bones, and Blood Vessels.—Tubercles may be generated in the muscular as in other tissues. M. Lugol has however only seen it in the psoas, in that case, the tubercle was in the midst of the muscle. There was no lesion of the bones in the neighborhood, the tuberculous matter had evidently been generated there.

More than twelve years ago, M. Lugol satisfactorily demonstrated the existence of tubercles in the bones, developed in the osseous tissue and increasing as tubercle does elsewhere at the expense of the tissue in which it is developed. They have been found in the centre of bones surrounded by healthy osseous structure. Tubercles are often developed around large blood vessels, but that dropsical effusions so common in scrofulous diseases, depended on the pressure of these tumors upon the vessels, M. Lugol has not been able to convince himself. He has never known one of these tuberculous tumors penetrate the coats of the vessel around which it was developed.

Tubercles in the Blood.—M. Lugol has found tubercles swimming in the blood of the iliac veins at the origin of the vena cava. It was impossible to admit that the tubercles had originated externally to the vessel. They were of an ovoid form, ten in number.

Having now studied tubercle in the different organs, we pass to the consideration of

The Formation of Tubercles.—Pathologists are by no means agreed upon this sub-

* Nor would thousands have been hurried into their graves, as they have been every year with rail-road speed, if phthisis or consumption, had not been treated as inflammations, by bleeding, antimonials, cathartics, blisters, &c. &c. Hundreds of these, would have been saved every year, by nature alone, from the change of seasons, who are now mouldering in their graves, the victims of the scientific quackery of the schools.—[H. H. S.

ject, some believe tubercles the product of inflammation, others a product or an alteration of secretion, others again a degeneration of the normal tissues. M. Lugol regards tubercles as *parasitical organs* generated in the economy with an organization which enables them to increase by intusseption, so that their progressive development is explained by their anatomical structure. Tubercles are not the normal tissue degenerated, else during their first stage we should be able to recognise the tissue which is undergoing the morbid change, but this is not so, wherever generated, tubercle is in every thing but form, the same; the organ in which it is developed never modifies its nature.*

As to the doctrine which attributes tubercles to inflammation, it deserves a more detailed notice.

Inflammation is a peculiar and complex state, having some symptoms which are inherent in its nature and essential, and others which vary according to its particular location. Now the products of inflammation differ in different organs and tissues. The liver does not suppurate as the lungs do, nor the serous as the mucous tissues. Tubercles on the contrary are as we have said *always identical, never varying* whatever organ they may attack. The generation of tubercles has been most studied in the lungs, let us examine it there in reference to inflammation as its cause. Pneumonia is a common disease, so common that did there really exist any connexion between it as a cause, and the generation of tubercles as an effect, that connexion would assuredly be discovered. But this is not the case. Nay more, the labors of Bayle and other pathologists prove that pneumonia has no connexion whatever with the generation of tubercles. Bayle examined the bodies of numerous patients dying with pneumonia he found the lungs hepaticised, carnified, but never tuberculous. Again, epidemic pneumonias, are by no means uncommon, and where they have prevailed, a great mass of the population ought to be affected with tubercles, yet this has never been noted as a consequence of epidemic pneumonias by any of the authors who have left us descriptions of them.

M. Lugol hesitates to allow pneumonia any influence even in augmenting the secretion of tubercle, his facts however, do not authorize him in pronouncing a positive opinion. He thinks that many pathologists have attributed pulmonary tubercle to inflammation, who never would have thought of adopting such an etiology, for any other form of tubercle as tubercle in the liver, the spleen, the mesentery, &c.—*Med. Gazette.*

M. Lugol has, it will be seen, confirmed every thing I have said in this work in regard to the prevalence of tubercular disease in the different organs, limbs and other structures. He also confirms every thing I have said of the uncertainty of the common symptoms by which to distinguish the disease, and of the futile nature of the common remedies for it, and for which I have received so much abuse from the asses of our profession. He has earned for himself immortal honors by his investigations in this protean disease, and I may now commend to him the investigation and practice of the new and scientific symptoms, I have introduced in this country to distinguish this disease, which he will find to be constant and invariable, and which cannot fail to give him a clue to a rational, scientific and successful mode of treatment.

* M. Lugol, I may say with great deference to his opinion, is mistaken in the true character of tubercles. They are, as I have found them by numerous dissections, diseased lymphatic glands, and the new symptoms I have introduced to distinguish this disease, and which depend entirely on the motive power of the system, demonstrate this fact in the clearest manner. (See the symptoms in the case of Mrs. J. P., page 38.) [H. H. S.]

From the Medico-Chirurgical Review, for January, 1841.

DISPARAGEMENT OF AUSCULTATION, BY M. LUGOL, OF PARIS.

The following are extracts from the fourth lecture on the formation of tubercles in internal organs:—

“The numerous checks and *repeated deceptions* to which physicians are daily exposed in the DIAGNOSIS and TREATMENT of tuberculous diseases, do they not prove that it is necessary to leave the beaten track of inquiry and pursue some other which is less fallible? You all know that auscultation and percussion are useless in the diagnosis of pulmonary tubercles. Both alike insufficient to announce the commencement of the mischief, they are superfluous at the very time that they become capable of indicating the presence of the tubercles; for then these are discoverable by other means, and alas! are too far advanced in their development to warrant our hopes of arresting their progress—at least in the generality of cases. I will even go a step farther, and say that the unlimited confidence placed by the greater number of practitioners of the present day in auscultation and percussion, has had the effect of too often inspiring a *fatal security* in many tuberculous diseases, which are thereby allowed to advance in their progress, until this is revealed by physical phenomena at a period when remedial measures have but little chance of affecting any good.

“But what are the means, you will say to me, that are to be substituted in the room of auscultation and percussion? I answer, gentlemen, induction. Examine by these boasted methods this patient, and tell me what results you obtain. Negative results, you will reply. And yet I maintain that he is tuberculous; for his father, his mother, and his brothers have all died of tuberculous disease; and he himself is affected with it in his chest at the present moment. Believe me, this plan is much less deceptive than the other one. I tell you, the inductive method cannot mislead you; for nature is invariable in its causes as in its effects; and the external signs of tuberculous scrofula must give you assurance that similar morbid productions exist in internal organs, especially in the lungs.*

“It is by viewing the question from this elevated point of view, by studying it in all its *ensemble*, that you will be best enabled to comprehend it in its details; and these cannot be understood by the special methods of examination which have been so much recommended of late years.

“The tuberculization of internal organs exhibits in its development the same phenomena as tubercles which are outwardly situated—there is no pain, and nothing of mechanical derangements.

“The existence of tubercles in the lungs is so frequent, that I must admit that they are present in all scrofulous persons. You know that all, or almost all, patients, who have pulmonary tubercles, are, or have been at some time, affected with tubercles in the neck; the majority have had during infancy this external sign of scrofula; while others have had it at a later period of life. I believe that pulmonary tubercles frequently exist in early youth: but it is chiefly about the age of puberty that they are apt to be developed. Puberty in truth seems to have a fatal specific influence in promoting their development; and in our wards at the present moment there is a case which seems to confirm this opinion. A scrofulous patient, who, although 22 years of age, exhibited none of the usual characters of marriageableness, has just died; and in him no tubercles were found in the lungs.”

* M. Lugol is mistaken in regard to the certainty of this method; for nothing is more common than to find all the external signs of tuberculous disease, without tuberculization of the lungs, and this fact is disclosed by the absence of the magnetic symptoms, while their presence gives the first notice of the commencement of the disease in the lungs, even before the cough commences. I, many years since, traced, with these symptoms, (which I introduced to distinguish tubercular disease,) a direct connection between the posterior spinal nerves, and the ganglionic, or sympathetic system of nerves, which has been constantly denied by the *donkeys* of our profession. I also traced this connection with *clairvoyants*, and Volkman and Bidder have now traced it with the *microscope*. The latter nerves, or “those of the sympathetic system, are seen not only to penetrate to the centre of the spinal nerves, but to spread themselves around the circumference of the latter, where, by a careful measurement, the greater number are found to be distributed. The sympathetic nerves, in reality, originate in the ganglia, but not only in the ganglia of the sympathetic cord, but also in those on the posterior branches of the spinal nerves.” Froiep's Notizen, xxxi. 20.—LONDON LANCET. June 24th, *Versus*. The advocates of the theory of ‘*spinal disease*’—‘*spinal irritation*’—‘*nervous affections of the spine*’—‘*spinal neuralgia*,’ &c., with all their torturing appliances. How are the mighty fallen!

Extract from M. Louis' Memoir on the Proper Method of Examining a Patient, and of Arriving at Facts of a General Nature.

Peritonitis,* when of a chronic character from its commencement among adults, that is, between the ages of fifteen and a very late period of life, is, according to facts which I have recorded, constantly tuberculous, or connected with the existence of gray semi-transparent granulations, developed either upon or under the peritoneum. But, as I have already stated, neither of these lesions exist in any organ unless it be observed likewise in the lungs, so that when there exists a case of well-marked chronic peritonitis, we are able, independently of the symptoms referable to the respiratory organs, or even in their absence, to recognise the existence of phthisis, or, in other words, the development of more or less tubercles, gray semi-transparent granulations in the lungs. We ought to do so, for if the law we have just stated admits of some exceptions, they are very rare, and the law will not be the less certainly established. *I have more than once announced the existence of phthisis in patients who presented all the symptoms of chronic peritonitis, but neither auscultation nor percussion of the chest afforded any signs of an appreciable alteration of the pulmonary parenchyma, and this even in patients who had not any cough.* This diagnosis many may consider as having a very slight foundation, and others may think it very bold, but it was a just one, however, and I could not give it up without, as it were, denying the laws of the animal economy, and science itself; for these laws are science.

From the Medico-Chirurgical Review, for January, 1841.

OBSERVATIONS OF M. LISFRANC, OF HOSPITAL LA PITIE, ON WHITE SWELLING.

"We find here the application of the beautiful axiom of Hippocrates; *experimentia fallax*. This patient has come to ask our assistance for a white swelling of the knee joint, accompanied with much pain and heat. We have had recourse to antiphlogistic remedies, taking care to employ with discretion evacuations of blood, in order that we might not injure the ground on which we had to carry on the war; subsequently we have used discutients when the chronic state of the disease was definitely established. For a time our success seemed complete; the pain and swelling had nearly ceased, when most unexpectedly, and without any appreciable cause, these symptoms, accompanied with effusion into the joint, returned as severely as ever. The pains yielded for a time to the endermic use of the muriate of morphia; but again they became most distressing. We shall be obliged to amputate the limb; for in all probability there is erosion of the cartilages, and possibly caries of the bones. Nothing is more insidious than the prognosis of chronic swellings of the joints. Here is a second case:

"A young man fell upon his knee, four years ago; the slight inflammation which followed was readily dissipated by the use of leeches, &c. The symptoms however returned every now and then; and ultimately the joint became permanently engorged. The lymphatic constitution of the patient forbade the use of very active depletory remedies; at first they produced most satisfactory results; and after a relapse of the symptoms, the employment of the mercurial ointment, according to the plan recommended by M. *Serre d'Ures*, again gave hopes of a decided amendment. This, however, was only temporary, and we therefore suspected that there must be, in some part of the system, a principle or element which nullified all our exertions. We suspected the existence of tubercles in the lungs; and, *dans une grande consultation*, this suspicion was proved to be, alas! too correct."

SKETCHES OF FRENCH SURGERY AND SURGEONS, BY AN AMERICAN.

To those who are in love with Continental Schools of Practical Surgery, the following sketches by an American Physician, Dr. Harlan, published in the Medical Examiner, of Philadelphia, may not be devoid of profit. We would earnestly direct attention to his observations. There is a growing disposition in this country, a disposition unfortunately

* Inflammation of the membrane that lines the cavity of the abdomen.

fostered by some, to look with admiration on Foreign Medicine, and more particularly on Foreign Surgery, and to imitate that mere *artiste-like* skill, mechanical dexterity, and disregard of the *scientific* treatment of disease, which have hitherto contrasted slowly with the useful and honorable, though not the showy characters of English practice. Let us hear from an eye-witness what Parisian Hospitals and Parisian Surgeons are.

“Parisian hospitals and French surgery might be presumed, *a priori*, to be the first objects of attraction to a practical surgeon; but I cannot but confess that a longer acquaintance with them, a more extended course of investigation, and a more familiar intercourse with their most eminent teachers of surgery, have in no small degree lessened the admiration with which I once viewed the *eclat* generally attributed both to the men and the institutions. It is true, we cannot too much admire the long-continued and laborious application by which they have attained perfection as anatomists, and the consequent manual dexterity in operations, so universally admitted as a distinguishing characteristic of French surgeons,—and here their dexterity or superiority ends. Not only so; this dexterity itself has been obtained at the expense of principle and at the expense of life; thousands are annually consigned to a premature grave by operations not always necessary to be performed at all, or improperly timed, or performed in cases that must terminate fatally, with or without operations. The mortality occurring at the Hotel Dieu, perhaps one of the best, is absolutely frightful in amputations alone; the surgeons admit a loss of ninety-five per cent., and one of the *internes* admitted, that during his residence for one year at the Hotel Dieu, not one case of recovery occurred after amputation! I esteem M. Roux, the surgeon-in-chief of this extensive institution, as a personal acquaintance, and would not heedlessly detract from his hard-earned reputation; and in thus alluding to the results of my own personal observations, I have the interests of science only in view.”

Here is a sufficient answer to the assertion, that great operators are not necessarily prone to perform operations that might by caution and skill be dispensed with. A knowledge of human nature would suggest the contrary, and experience confirms it. Men will be *fond of what they are conscious of excelling in*, and there is something particularly attractive in the *eclat* of capital operations. The fruits of studying operations as the great aim and object of a surgeon, are perceptible in France, and will be visible ere long unless a strong resistance is offered to such a spirit in England.*—*Med. Chir. Review.*

“Every one,” says Professor *Debreyne*, “knows that the great multitude of cases, or rather the apparent frequency of chronic gastritis (dyspepsia) arises, on the one hand, from the extravagant extension of the principles of the self-called *physiological medicine*, and on the other hand, from the prepossession in the minds of many practitioners in favor of the system of *universal irritation*, and therefore in favor of *antiphlogistic remedies* in treating them.

All pains and disorders are attributed by these men to chronic irritation or inflammation of the gastric mucous membrane. Whenever the tongue is somewhat redder than usual, and there is any uneasiness in the epigastric region, loss of appetite, and irregularity of bowels, recourse is had at once to *leeches*, gummy drinks, and a *starving regimen*.

----- A disciple of the *physiological*, or Broussaian school, sets himself to treat a case of chronic gastritis. He recommends—and very properly—the remedies just now mentioned. Next day the symptoms are relieved; but as there is still some tenderness in the epigastrium, the leeches are ordered to be repeated. Again relief is experienced. The epigastric pain however continues from day to day in spite of the vigorous depletory treatment. The patient too becomes gradually weaker and weaker: his pulse quickens, and a slow fever is lighted up in his system; while all the while the appetite is pretty good, or even craving. We need not pursue such a history, as we shall presently point out how such a case should be treated.

----- A second patient presents himself, laboring under atony of the stomach, which

*“I never have known a professed or devoted surgeon who was a good physician,” has long been a common remark among physicians of this country.

is usually characterized by derangement of the digestion, and uneasiness or even actual pain in the epigastric region.

Now this is often considered a case of chronic gastritis; and it is also treated with leeches, low diet, &c. The immediate result of this treatment is an increase of the general weakness. Perhaps, however, the epigastric uneasiness is relieved—a most deceptive sign of real amendment, and one likely to mislead the inexperienced practitioner. Probably the application of the leeches is repeated, under the mistaken idea that there is still some lurking inflammatory irritation.

----- Now let us take another case, that of a patient affected with gastralgia, or gastrodynia. In such cases, along with the severe pain in the region of the stomach, there is usually loss or impairment of appetite, and other symptoms of a disordered digestion.

There can be no mistake here, it will be said by the *physiological physician*, that a genuine gastritis exists. Numerous leeches are therefore applied, and a most strict diet is enjoined.

Now almost every pain—whether phlogistic, rheumatic, neuralgic, or even atonic—is relieved for a time by the application of leeches in the neighborhood of the affected part. In neuralgic and atonic pains, the relief is however delusive and only temporary; for next day, or even sooner, they are as severe as ever. If this mode of treatment be there fore continued, the patient's strength is more and more exhausted, and the disease probably aggravated at the same time.

----- Then again consider the symptoms of a patient affected with scirrhus or incipient cancer of the stomach. He suffers from a sense of continual weight, and from a dull and deep-seated pain, especially when the stomach is empty, from most troublesome flatulence, acidity, frequent vomiting of a glairy matter, constipation, &c. The anti-phlogistic treatment—under the impression that the case is one of chronic gastritis—is followed by nearly the same effects, as we have pointed out, are apt to follow in atony of the stomach.

----- Lastly, in cases of ordinary *embarras gastrique*—characterized by loss of appetite, a bitter taste in the mouth, a coated tongue, nausea, vomiting of bilious matters, sensibility of the epigastrium, headache, &c.—the physiological physician has often been sadly in error in supposing that the antiphlogistic treatment was at all necessary for its relief. -----

HYDRATE OF POTASH.—This new preparation of Iodine, which has been three or four years under the puffing process for the cure of scrofulous diseases, and after a fair trial has been discarded by some of the most eminent men of the medical profession, is now found to be a virulent poison, as will be seen by the following extract from the *Med. Chir. Review*, for Oct. 1840.

GLASGOW ROYAL INFIRMARY AND LOCK HOSPITAL.

DANGERS FROM THE EXHIBITION OF THE IODIDE OF POTASSIUM.

Dr. Laurie, physician to the above Institution, relates several cases with the view of pointing out the dangerous consequences that may follow the use of the iodide of potassium. The cases we need not quote—the conclusions we may.

“It would appear,” says he, “that the hydriodate of potash and iodide of starch are dangerous and uncertain remedies. I am, in my own mind, quite satisfied that they were the causes of death in cases 3d and 5th. Their *uncertainty*, in a remedial point of view, is even more to be lamented than their danger. If they were unsafe in large doses, and safe in small, or if the disease for which they are exhibited, or the constitution of our patient, had an indefinite influence on their *poisonous* effect, they might be used with comparative impunity. As yet, however, I know of no criterion by which we can judge beforehand of their probable effect; that the quantity exhibited is no guide, I am very certain.”

PHYSIOLOGICAL AND PATHOLOGICAL RESEARCHES ON
TUBERCULOSIS.

—
BY H. LEBERT, M. D.
(Muller's Archives, Nos. 2 and 3, 1844.)

—
SUMMARY.

1. The pathological peculiarities of tubercle are exhibited in its microscopical structure.
2. The constant elements of tubercle are, molecular granules, an adhesive hyaline mass, and peculiar tubercle cells, from 0.05 to 0.01 of a millimetre in diameter—of irregular form, containing no nucleus but molecular granules.—Water, æther, and weak acid, scarcely change them. Concentrated alkalis, liq. ammonia, dissolve them completely.
3. The dimensions of tubercle cells undergo many variations, which depend rather upon the different organs than upon differences of age. They are most easily recognized in crude yellow tubercle.
4. Tubercle corpuscles consist of cells having a very low power of development.
5. The opinion that tubercular substance is a modification of pus is contradicted in the most positive manner by the microscope.
6. Tubercle corpuscles are distinguished from undeveloped pus globules, by the spherical form and greater diameter of the latter. Cancer cells are clearly distinguished by their being two to four times as large, and consisting of a cell wall, and a large clear nucleus, often containing nucleoli.
7. When tubercle softens, the adhesive matter becomes fluid, and the corpuscles rounded, their opposition to each other is destroyed, they become distended, and hence appear larger. This, however, is not the result of growth, but the beginning of decay.

8. The pus which surrounds softened tubercle never originates in the tubercle itself, but is formed directly in the surrounding parts.

9. The microscope can determine whether we have to do with softened tubercle, with purulent matter, or whether there be a mixture of both.

10. Pus appears to destroy quickly tubercle corpuscles, and thus to make their individuality undistinguishable.

11. When the irregular outline and close opposition of tubercle cells, in their first stage of development, present the second stage of separation from each other, distension and roundness, then the third stage of disintegration commences. The corpuscles are broken up into a granular, half-fluid mass, and lose their individuality.

12. Tubercle becoming hard and calcareous (*état cretace*) is a natural process of cure. The peculiar elements of tubercle disappear, and become in part absorbed. In their place, small mineral granules, and sometimes crystals of cholesteriene, are deposited. The deposition of lime is generally accompanied by an increase of pigment. According to the chemical analysis of M. T. Boudet, there exist, as principal elements, chlorate of sodium and sulphate of soda; salts of lime only in small quantity.

13. Among the occasional elements of tubercles may be mentioned melanosis, which is the most frequent; further, fat, filaments, dark olive-colored globules, and crystals. Sometimes we find mixed with tubercle, but in no way belonging to its substance, the products of inflammation, serum, pus, and the elements of epithelium in various forms.

14. The seat of tubercle in the lungs is generally the elastic cellular tissue. Yet it is also found in the air vesicles, and in the bronchial capillaries.

15. The tissue of the lung surrounding tubercle may be sound, but is mostly in a state of congestion or inflammation. The last is either globular, or spread over a large portion of a lobe.

16. The pus found surrounding tubercle is often not the result of grey hepatization, but comes from the mucous membrane of the small, partly destroyed, and open bronchi, in the substance of the lung.

17. The pneumonia surrounding tubercles has nothing specific; there is found in it the same elements of the exudation as in ordinary pneumonia—viz. aggregate globules, fat vesicles, pus corpuscles, &c. Tubercle corpuscles are not generally found among the products of exudation.

18. Sometimes there is found surrounding tubercle a peculiar form of chronic inflammation, with yellowish hepatization, and increased consistence of the tissue. The vesicles of the lung, small bronchi, and parenchyma, are partly filled with coagulated fibrin, and a formation of new fibrous filaments, partly with aggregate and pus corpuscles, and in the centre of the chronic slightly vascular hepatization there is found a highly vascular acute lobular pneumonia.

19. The degree of consistence of acute or chronically inflamed lungs depends upon the amount they contain of fibrin, fluid blastema, and corpuscles. Much fibrin, with a small quantity of blastema and corpuscles, produce induration; much fluid blastema, with a small number of corpuscles, cause softening. An equal proportion of these different elements produces a medium degree of hardness.

20. Lungs rendered compact from the pressure of a pleuritic effusion, often exhibit throughout no appearance of inflammation.

21. The grey semi-transparent granulations of the tissue of lung are also a true form of tubercle. Their color and transparency are partly dependent on the apposition of the tubercle corpuscles to each other, throughout the intact fibres of the lung, partly on the existence of a large quantity of adhesive material.

22. The grey granulation is not always the commencement of the formation of yellow tubercle; the last is often primarily developed as such.

23. The vascular network found surrounding the grey granulations is neither a proof of inflammation nor of a new formation, but rather results from the pressure on many capillaries, occasioned by the tubercular deposition, and the consequent distension of the remaining capillaries, which are reduced in number.

24. The opinion that grey granulations may be the result of inflammation is opposed by positive observation.

25. The process of ulceration is throughout different from that of suppuration. Thus we find on the mucous membrane of the bronchi, suppuration without ulceration, and on the intestinal mucous membrane, ulcers without suppuration. The last cause of ulceration is from inflammation by parasitic deposition, sometimes, from causes unknown to us, producing obliteration in a certain number of capillary vessels.

26. The tubercular ulcer of the lung is not physiologically different from the tubercular ulcer of the intestines or of the skin.

27. In tuberculosis a general ulcerative diathesis is found to take place even in organs where tubercles appear very seldom. This is clearly established by the excellent labors of Louis.

28. The internal fluid layer of the contents of a cavernous ulcer of the lung, contains—*a*, tubercular substance, seldom intact, the corpuscles for the most part in a state of distension, or broken down into granules; *b*, pus corpuscles sometimes in small quantity; *c*, “puridea” corpuscles; *d*, aggregate corpuscles; *e*, purulent mucus; *f*, blood corpuscles; *g*, filaments of the lung; *h*, black pigment; *i*, epithelium; *k*, sometimes crystals; and *l*, adipose tissue.

29. Amongst this thick fluid are generally found pseudo-membranes, consisting of coagulated pus elements inclosing fibrin.

30. Among the pseudo-membranes covering the diseased tissue of the lung is found a true pus membrane, consisting of filaments inclosing small corpuscles. It generally becomes partly destroyed by a new irruption of tubercle occurring in the same.

31. This membrane is a natural effort towards cure, isolating the ulcerous tissue of the lung, and thus favoring its cicatrization.

32. Between the pus membrane and the tissue of the lung is often found newly-formed filamentous tissue.

33. Surrounding the cavernous ulcer is generally found a deposition of recent crude tubercle.

34. The healing of caverns takes place,—*a*, from isolation, by means of the pus membrane, and shrinking of the cavern; *b*, by deposition of fibrin, which fills up the cavern, grows to its walls, and so forms a fibrous cicatrix; *c*, by mineral deposition in the cavity, and formation of a filamentous tissue around the same.

35. There are no peculiar mucous bodies; what has been described as such are nothing but pus corpuscles secreted from diseased membranes. Pus tests are thus henceforth useless.

36. In the sputa of phthisical individuals the following elements are found—*a*, mucus; *b*, pus corpuscles, existing in large quantity—they are sometimes found in a shrunken state, and may easily induce error; *c*, epithelium in its various forms; *d*, granular substance in great quantity, probably consisting of broken down tubercle corpuscles; *e*, small yellow shreds, pieces of pseudo-membrane; *f*, filaments of the lung; *g*, fat vesicles; *h*, blood corpuscle, sometimes combined with coagulated fibrin; *i*, aggregate corpuscles; *k*, small infusoria, vibrios, but this seldom, and only accidentally.

37. The peculiar tubercle cells are not commonly found in the expectoration of phthisis. There are also no constant means of distinguishing the sputum of phthisis pulmonalis from that of other diseases.

38. Filaments of the lung in sputum indicate an ulcerous cavity. Their presence, however, is rather exceptionable than otherwise.

39. The greatest portion of the sputa in phthisis does not come from caverns, but is secreted from the bronchi.

40. The copious muco-purulent secretion of the bronchi, so frequent in phthisis pulmonalis, is one of the ways nature adopts in order to prevent the great destruction of the circulation which would necessarily result from the complete imperviousness of one portion of the capillary system, and distension of the rest.

41. A portion of the broken down tubercle of the ulcerous cavity mixes itself with the expectoration; another portion is re-absorbed.

42. The law announced by Louis, that after the age of 15 years the lungs contain tubercles, when they are found in other organs, is throughout correct. [This is a great mistake, as every physician knows who practises the magnetic symptoms.]

It may, however, be so far modified, that if very extensive tubercular deposition has occurred anywhere in an organ—as, for instance in the liver, the kidneys, or the peritoneum—the lungs often contain very little.

43. In childhood, tubercles are more frequent in the membranes of the brain, the glandular system, and the peritoneum, than in adults.

44. The thickening of the pleura in tuberculosis of the lung not only originates in inflammation, but also in increased nutrition; from its greater vascularity, dependent on the diminution of blood in the lungs. Thus a supplementary organ for the circulation of the lung is produced, and at the same time, from its growth to the thoracic walls, the anastomosis with the great circulation is increased.

[Nothing can be more erroneous than this old astrological theory, which imputes the thickening of the pleura in tuberculosis of the lungs to inflammation. *Ed. Dis.*]

45. It results from embryological and pathological researches, that neither around the tubercle, nor in the pseudo-membrane of the pleura, are new vessels formed independent of the general circulation. New vessels in diseases are rather formed centrifugally from the general circulation.

46. The apparent transformation of the pseudo-membrane into cartilaginous substance consists only in the filaments being pressed together, without the formation of the peculiar cartilage elements. In the same manner the so-called ossification of the pseudo-membrane only consists in the deposition of an amorphous mineral formation.

47. The three principal forms of glandular tubercles are those of the more superficial—the bronchial and mesenteric glands: the last have a very slight tendency to soften.

48. The tubercular matter in the glands is throughout the same as that in other organs.

49. The existence of a sensible scrofulous matter we cannot admit; what has been considered as such is either the result of common inflammation or of suppuration—certainly under the influence of cachectic elements, but without a peculiar material or tubercular deposition accompanying the inflammation or suppuration.

50. Tuberculosis in the osseous system is a much more rare disease than is generally supposed at present. There is frequently found here a difficulty in determining between concrete pus and tubercular matter. In doubtful cases, the microscope can alone determine the diagnosis.

51. True scrofulous diseases, which are mostly distinguished by inflammatory and suppurative eliminations, are to be separated, on the one hand, from tuberculous diseases, and on the other, from idiopathic chronic inflammations of the eye, skin, glands, bones, joints, &c. The last category is often confounded with scrofula in children.

52. In a word, the positive diagnosis and abstract separation of scrofula are most urgent desiderata in modern medicine.

[The magnetic symptoms always give a positive diagnosis, but no abstract separation of scrofula. There are no such distinctions in nature or in fact. Compelled at last to acknowledge that the common cases of chronic disease of the organs and limbs, or of the serous membranes and tissues, called chronic inflammations, are cases of scrofula, an attempt is made to set up distinctions where there are no real differences. All the cases of scrofula, in all its forms, and in all ages and conditions, are distinguished in an instant by the same symptoms, and are constantly cured by the same remedies, and these facts, which are now known to hundreds of physicians in this country, are fatal to the assumptions on which these distinctions are founded. *Ed. Dis.*]

53. The grey granulations of the membranes of the brain—viz. of the pia mater, exhibit clearly between the filaments of the serous membrane depositions of tubercle corpuscles. They present themselves, besides, frequently in the brain, together with yellow miliary tubercle; with tuberculous infiltration, as well as with large tubercles.

54. In the liver tubercles are often found in very considerable masses, and even with true caverns. The cases are easily confounded with cancer. In like manner, the change into softening and breaking down of certain cerebriform tumors of the liver often presents a similar appearance to tuberculous depositions.

55. Besides the fatty depositions in the liver, fatty degeneration of the heart is sometimes present in phthisis; also a tendency to internal depositions of fat, whilst, for the most part, it disappears from the external parts.

56. The kidneys also may be almost entirely filled with tuberculous degeneration. In these cases fewer tubercles are found in the lungs.

57. In tubercles of the peritoneum there are found, together with tubercle corpuscles, several filaments of the serous membrane. Peritoneal tubercles have little tendency to softening. They are mostly accompanied by a considerable pigmentary deposition.

58. Tuberculosis of the peritoneum produces sometimes perforation of the intestine, which is generally fatal; but in very rare cases, life is maintained by the formation of an artificial anus.

59. The consistence of crude tubercle in the intestines is usually less thick than it is in other organs. No pus is found upon tuberculous intestinal ulcers.

60. The microscopic elements of tubercular ulcers of the intestines, besides broken down tubercular cells, are cylinder epithelium, broken down granular mucous membrane, and the filaments and bundles of the muscular coat. The young epithelial cells are not to be confounded with pus corpuscles.

61. On the diseased mucous membrane of phthisis are occasionally found polypi, melanotic and tubercular excrescences.

62. In extremely rare cases, tubercles are found deposited between the coats of arteries, an exceedingly important fact for (in favor of) the excretion of tubercle from the blood.

63. Tubercles are also found in the pericardium and heart. An extensive adherence often thus takes place, and a vascular anastomosis of the branches of the coronary artery with those on the surface of the lungs, a remarkable communication between the vessels of the larger and smaller circulations.

64. Tubercles in the cavity of the chest, as well as of the abdomen, can open themselves externally, and thus form fistulæ of the lungs and of the intestines.

65. Tubercles and cancer do not exclude one another, or even interfere with their separate march. Both morbid processes can at the same time run through their stages of development in the same person.

[We have investigated long since and very thoroughly the subject of cancer connected with scrofula with the magnetic symptoms, dissections and the microscope, and have little doubt but there will hereafter be found a fallacy in this last paragraph of the above summary, fatal to the distinctions that are here attempted to be established. It is only in the second stage of tubercular disease of a gland, membrane, or tissue, that cancerous degeneration is developed, and then only when every other contiguous membrane, fibre, tissue, or substance, becomes equally involved in the disease, and this condition appears to be always necessary to the true cancerous formation.]

We will not affect to conceal the fact that we republish the above comprehensive summary of elaborate researches on tubercular disease, with a degree of satisfaction partaking of a sense of personal triumph. It is now many years since we advanced the self-same doctrines of the all-pervading character of tuberculosis, in calm and confident independence of the ignorant sneers and arrogant denunciations of a large portion of the profession. To scoff them as "visionary theories" and "arrant quackery," was, even within a recent period, deemed almost essential to professional respectability among those who condescended to advert to them, or in whose hearing they were mentioned. It was of no consequence that we had traced and demonstrated them in the most "regular" and legitimate manner, and by a process of induction as severe and scrutinizing as is ever adopted in any scientific investigation; it was a matter of no weight with these inflated scorners that we had verified and matured these doctrines by the ocular evidence of many continuous dissections, and by the results of experience in a long, extensive, and laborious practice, both in town and country. All this was of no value with such opponents, first, because they had not made these discoveries themselves; secondly, because they were new; and thirdly, because they had not received the approving stamp of foreign authority. Now, however, that our original views, publications

and practice upon these subjects, and our most novel and even startling propositions have been confirmed by such men as Lugol, Louis, Lisfranc, and others of the eminent Parisian schools; now that our long proclaimed doctrine that the ganglia of the posterior spinal nerves are connected with the ganglia of the great sympathetic nerve; and as the latter are connected with the organs, so external pressure on the former would indicate the seat of disease in those organs—now that this connection has received full and irresistible confirmation by the dissections and microscopic determinations of Volkman and Bidder, the German anatomists, behold! our lofty medical *savans* stroke their chins, knit their brows, and look as sage and as comical as the carved heads of their canes. With what grotesque caprice of physiognomy they will peruse the above synopsis of tuberculosis, by Lebert, from *Muller's Archives*, it is rather difficult to imagine; and it is to be regretted that it cannot be caught by the Daguerreotype process, for the embellishment of the medical journals of the schools.—*Ed. Dis.*]

CONSUMPTION.

We would again direct the attention of the readers of this work to the importance of the use of the magnetic machine in the treatment of tubercular consumption, as our experience of its effects in more than 450 cases of this disease leaves no doubt but it greatly assists the action of other remedies in reducing tubercular disease of the lungs.

These cases were all distinguished by the magnetic symptoms, which *never* err; and the state of the tuberculations was often observed through clairvoyance during the progress of the treatment, as were the changes in the appearance of the tubercles from the action of the instrument.

Of 164 cases of ladies and gentlemen who visited our rooms in 1844, in all the different stages of the disease, we lost only *eleven*; and of 203 who visited our rooms in 1845, we have lost only *nine*. In two of these the tuberculations were reduced as shown by the magnetic symptoms and by clairvoyance, but both died of mucous disease, in the then feeble state of the lungs, in consequence of colds.

All the cases were from the commencement of the treatment, under the action of the magnetized gold pills in conjunction with that of the machine, and a great majority of the cases the magnetized plaster was used at the same time. No other medicines were used in these cases, except, occasionally, different articles to palliate the cough, and in a few cases the Hardwood Tar Syrup, or the pill composed of Hard. Bal. Copa. cubebs and Ext. Hyos., where the tuberculations were accompanied with much mucous disease, generally from colds after the tubercles had nearly disappeared.

This course of treatment, in fact, cures every case of consumption in the first stage (which is easily distinguished), and more than nine-tenths of the cases in the last stage; so that when this practice is generally adopted, very few will be lost by this fatal disease.

We should have lost but eight cases in 1845, but for the interference of a physician who persuaded the mother of a young lady, nearly recovered from the disease, to allow him to prescribe for her, when she soon began to grow worse, and then he began to apply his cupping glasses to the chest, from which she bled freely and repeatedly—was soon confined to her bed, and in a few weeks carried to her grave.

From the N. Y. Dissector.

MEDICAL DUODYNAMICS.

The symptoms we have introduced to distinguish chronic tubercula or chronic disease of the serous surfaces, are always present in acute diseases of these surfaces, and depend entirely upon the action of two forces, or upon the duodynamic or moving powers of the system. They are founded upon the fact, that these forces act in unison in health, but are interrupted in disease—the signs of which are distinguished with facility and certainty, without any previous knowledge of the case.

The absence of these symptoms, and the presence of disease in the organs, limbs, or other structures, determine, with the same facility and certainty, disease of the mucous surfaces, acute or chronic.

The duodynamic treatment we have introduced, is founded on the fact that motion is interrupted or lost in some part of the body, organs, or limbs, and cures the disease in restoring the interrupted or lost motions, by the action of two forces, emanating from different kinds of matter, and acting on the same, or different surfaces of the body, organs, or limbs. These symptoms are prominent and uniform in their character, and reduce and bind down the classification of diseases to the narrow limits of *acute* and *chronic* diseases of the *serous*, and of the *mucous* surfaces, or to four classes, orders, genera, and species; and the duodynamic treatment of diseases which we long since adopted, supports and sustains this classification in the most steady and successful manner, and presents a strong contrast with the old never-ending classification and ever varying symptoms and treatment.

The posterior spinal nerves are connected with and terminate in the serous membranes or serous surfaces of the body, organs, and limbs, including those of the skin and fasciæ of the muscles, &c., and are the media of sensation; while the anterior motor nerves are connected with and terminate in the mucous membranes, or mucous surfaces, including those of the fasciæ of the muscles, the bronchia, and the alimentary canal, and are the media only of the forces which produce motion.

These different arrangements of the nerves of motion and those of sensation, account for the absence of the magnetic symptoms in disease of the mucous surfaces. Insensibility in these surfaces is as necessary to the maintenance of animal life, as sensibility is in the serous surfaces. The most intense inflammation of the mucous surfaces produces no pain. There is never any pain in these cases without an extension of the disease to the serous surfaces; yet our modern medical writers continue to repeat the tales of their grandfathers about the great and wonderful sensibility of the mucous surfaces.*

Acute or inflammatory diseases run through their course in a few days, or a few

* We commenced a series of experiments with the magnetic machine, about a year since, for the purpose of ascertaining whether the least susceptibility could be detected in the great mucous surfaces, and the result showed that no sensation whatever could be felt from the brass cylinder in contact with these surfaces, under the action of our most powerful machines, while the sensation from the button in contact with the skin, or serous surface, was so intense that it could only be borne momentarily.

weeks; while chronic diseases continue not only many months, but many years. The excitement of the system in the first is exalted and continuous, or has brief remissions or intermissions, while in the last it is depressed and periodical or accidental, with long periods of repose of many weeks or months, and is consequently as different as darkness is from light; yet the modern astrologers of the schools, like their ancient masters, who were priests, physicians, and astronomers, class them all as inflammations of different degrees, and treat them as such. Our modern astrologers also follow their ancient masters in pretending to distinguish these diseases by feeling the pulse, the aspects of the tongue, the urine, the stools, and the stars.

There is, however, nothing more uncertain than these signs or symptoms, unless it is the treatment founded upon them, as is well known to our faculty; yet they are taught as a science, with all the gravity due to these subjects, involving life or death. On the contrary there is nothing more certain than the magnetic symptoms, or the duodynamic treatment founded on them, in the absence of accidents not under the control of the physician; yet such is the attachment of men to old systems—the old astrological symptoms and treatment will continue to be taught by the professors in our medical colleges as long as they are of any value in their market.

Acute and chronic tubercula, or inflammatory and chronic diseases of the serous membranes, or serous surfaces of the body, organs, or limbs, including the skin and fasciæ of the muscles, are easily and invariably distinguished by pain more or less severe (in proportion to the intensity of the disease), produced by pressure on the ganglions of the spinal nerves, in the intervertebral spaces along each side of the spine, without any previous knowledge of the case—no matter what name may have been given to the disease by physicians, nosologists, or other medical writers.

We always press with the thumb of the right hand on the intervertebral spaces of the left side of the spine; and with that of the left hand on the intervertebral spaces of the right side. These directions will enable any person of common sense to distinguish tubercular disease with facility and certainty, without even the aid of a physician. Negative matter, as the acid and the metals, should be the principal ingredients in the preparations of medicine for disease of the serous surfaces, and should be used in connection with the action of the magnetic machine.

DISEASES OF THE MUCOUS SURFACES.

Acute and chronic diseases of the mucous surfaces are invariably distinguished by the presence of disease of the body, organs, or limbs, and the absence of the magnetic symptoms; and require for their reduction a treatment entirely different from that of tubercular disease of the serous surfaces. Positive matter, as the alkalies and the gums, should be the chief ingredients in the preparations of medicine for diseases of the mucous surfaces, and should be used in connection with the action of the magnetic machine.

Thomasville, Ga., May 1, 1845.

DR. H. H. SHERWOOD.

Dear Sir—Inasmuch as I recently sent you a summary view of the merits of Swedenborg's Animal Kingdom, as taken from a foreign medical periodical, I now send you, in connection therewith, an extract from the work itself—A. K., vol. ii., page 158—in which the principles of motion appertaining to the human organization are explicitly stated, and apparently in direct accordance with those which you are now advocating. Should they meet an approval, please insert them in your Dissector with such comments as you may deem proper.

Respectfully yours, &c.,

WM. HUNNEWELL, M. D.

“It is a truth constantly presented to us as the result of all our analytic investigations, that every action of the cerebrum and cerebellum is determined through the fibres; and that the fibres cannot be determined into act, excepting by their beginnings or principles; in short, by the organs that are prefixed to the fibres. The latter must certainly be excited to motion by their principles, and commence and describe their motions in this way. It is absurd to suppose that any action can begin in the middle of a fibre, and not in its first terminus. If, then, it begin in the first organs, it must inevitably begin in the cortical glands; for the fibres commence, and are conceived and produced, in those glands, and the arterial vessels of the cerebrum terminate also in them. Hence, if the principles of motion exist in them, according to all physical and philosophical laws, as mutually confirmed by and confirming each other, those principles must necessarily commence by a kind of active, living, or locomotive reciprocal force, that is, by a kind of expansion and constriction, or systole and diastole, such as we observe in a gross form in the lungs and heart; for the same conditions are involved, whether the spirit is to be driven through the fibres, or the blood through the vessels. The blood cannot be driven through its arteries without the reciprocal expansion and constriction of the heart; nor can the spirit be driven through the fibres, which are little canals and vessels analogous to the arteries, only more pure, without the reciprocal expansion and constriction of the cortical glands of the cerebrum, which on this account deserve the appellation of pure corcula, or little hearts. Assuming or granting these points, the necessary consequence is, that every time the cortical and cineritious substance of the cerebrum, cerebellum, medulla oblongata, and medulla spinalis, contracts or constringes itself, the whole mass of those parts sinks down and undergoes systole; but, on the other hand, undergoes diastole, when the same substance, I mean the whole congeries, expands. This is the animation of the cerebrum—using the term cerebrum in its widest acceptance—that corresponds to the respiration of the lungs. We must now proceed a step farther. If the animal or nervous spirit, at the intervals of the constriction of these organic substances—of the little hearts of the cerebrum—is expressed by the cerebrum through the nerves and nervous fibres, of course it is expressed by the cerebellum into its grand sympathetic nerves, the par vagum and the intercostals: and granting this, it follows that these nerves act during the same intervals upon the fibres of the pulmonary plexus, and upon the fibres of the costal nerves; which cannot fail on the instant to act upon their muscles and membranes; nor the latter to act upon the ribs, and this upon the internal structure of the lungs. Hence, it follows that the animations of the cerebrum (using the term here again in its widest sense) must necessarily be coincident with the respiration of the lungs; and the fact is still more plainly declared by the influx of the fibres of the above mentioned cerebellar nerves, the par vagum, and the intercostal, into all the viscera of the abdomen; and by the motion of those viscera agreeing exactly, and keeping perfect time, with the respiratory motions of the lungs, as proved in detail in our Analysis.”—*Animal Kingdom*, vol. ii., pp. 158–9.

Each convolution of the brain or phrenological organ is divided into two equal halves, by a very thin nurilema, on the opposite sides of which the different or diverging and converging fibres are attached. Swedenborg, a hundred years ago, called the convolutions of the brain, organs, cortical glands, and corcula, or little hearts. He was also familiar with the fact, that motion is produced by the action of two forces. Wonder how many hundred years it will require to beat this knowledge into the heads of the professors of our medical colleges!

ON THE ACTION OF IMPERCEPTIBLE AGENTS ON THE LIVING BODY.

BY PROFESSOR D'AMADOR.

The above is the title of a paper read by the distinguished Professor of Pathology in the University of Montpellier, before the scientific Congrès at Nîmes. Professor D'Amador, though occupying the Pathological chair in an Allopathic University, is a declared adherent of Homœopathy; and the European reputation which his profound learning and brilliant talents have gained him, render peculiarly interesting anything proceeding from his pen. Want of space forbids us giving more than a brief analysis of the memoir whose title we have given above; but a careful perusal of the original, which is to be found in the 2d vol. of the "Bulletin de la Société Homœopathique," p. 131, will amply reward all who take an interest in the truly scientific development of Homœopathy.

The author commences by asserting, that all actions and impressions whatever, in a living body, are entirely vital or dynamic. Hence, food, poisons, viruses, miasms, and all the different kinds of stimulants that are applied to the economy, as well internally as externally, cannot have, and, indeed, have none other than a dynamic action; and hence, almost all that has hitherto been attributed to absorption, is destitute of foundation, and on examination is found to be false.

In proof of this assertion, he cites various facts from the domains of hygiene, physiology, toxicology, and pathology. It may be said that light, heat, water, and oxygen—that is to say, all that is most subtle, most ethereal, and least material in creation, are the true aliments of life. Not to mention those extraordinary but authentic cases where life has been prolonged, during months and even years of total abstinence, other and more familiar examples of this fact are not wanting. The development of the chick, strictly secluded from all external influences; the production of a beautiful flower from the bulb, which receives no other nourishment than the vapor of water; the growth of vegetables, on cloth, in well washed sand, in litharge, in flowers of sulphur, in unglazed leaden shot, supplied with no other nourishment than distilled water; but, nevertheless, presenting on analysis, all the constituent parts of the same vegetables growing in the richest soils, as shown in the experiments of M. Braconnot, are striking illustrations of this fact; and the observation of them drew from M. Braconnot this remarkable expression: "Oxygen and hydrogen—that is, water aided by the heat of the sun, appear to be the only elementary substances whence the universe was formed."

The function of digestion, apparently the most material and most chemical of all functions, is the most purely vital in its causes. Hence it is that the quantity of the nutritive substance is often the least important part, and that attention should be more particularly paid to its exciting quality and stimulating power. The dynamic effect of fluid aliments is still more evident, their result is rapid, often instantaneous. Set before a person worn out with fatigue the most substantial viands, he will scarcely touch them, and will not at first experience any benefit from them; but give him the smallest quantity of brandy, and in an instant he feels its beneficial effects.

The subject of fecundation furnishes our author with a fruitful source of illustrations for his doctrine; and the experiments of Spallanzani with the ova of the frog, the impregnation of women where the hymen was still perfect, the observations of Harvey, with respect to the fecundation of bitches and rabbits, in whose wombs no trace of semen could be discovered, are successively adduced.

"And again," he asks, "what are relative greatness and smallness in the case of the seeds of vegetables, but a mere *lusus naturee*? Who could believe that invisible seeds of plants are continually suspended in the atmosphere?—that those of mosses, fungi, of lichens elude our eye, and float invisibly in the circumambient air? Who could believe, if experience did not prove it to us every day, that within the case of a seed, which, from its minuteness, cannot be perceived by the microscope itself, there is contained the power which shall one day produce a vegetable? Who could believe, in fine, that in the embryo of the acorn there exists, in infinitely little, the largest tree of the forest, which only stands in need of development? According to Dodart, an elm can produce, in a single year, 529,000 seeds; Ray counted 32,000 on a stalk of tobacco. If all these seeds should come to perfection, it would only require a few generations, and a very small number of years, to cover the whole surface of the habitable globe with vegetables. If, then, atoms can produce an entire being, why should we tax them with impotence when the question is about merely mo-

difying a being? If an atom gives life, is it more difficult to conceive that it may change the mode of being? When *the greater* exists and starts up before us in the processes of nature, why should *the less* be declared impossible?

From the department of toxicology the learned Professor instances, in support of his views, the violent effects of a drop of prussic acid; the arsenical preparation celebrated in the 16th and 17th centuries, under the name of *Aqua toffana*, which killed with the rapidity of lightning; the poison of the wasp, hornet and bee, the smallest atom of which placed on the tongue burns it as severely as the most concentrated mineral acids; the virus of the scorpion, of certain spiders, and of serpents; the fresh water polypus, which, of all poisonous animals, possesses the most active venom. The experiments of Fontana show that *the thousandth part of a grain* of the poison of the viper, inserted in a muscle, suffices to kill a sparrow. Some plants furnish poisons which surpass in their effects the most corrosive metallic poisons.—De la Brosse in his *Voyage aux régions intertropicales*, has these words:—"There arrived seven or eight negroes in palanquins, the principal personages of Lowango, who presented their hands to be shaken by the French and English officers. These negroes had previously rubbed their hands with an herb, which is so extremely poisonous that it takes effect in a moment. They succeeded so well in their nefarious designs, that five captains and three surgeons fell dead on the spot." De la Brosse does not mention how the negroes preserved themselves from the effects of the deadly poison they had in their hands.

The effluvia exhaled by certain plants, the dew or drops of rain that fall from the leaves, can produce injurious effects, as is said to be the case with the mancinelli and the rhus toxicodendron.

From pathology the Professor cites the following facts:—The minute quantity of matter from the malignant carbuncle, and of saliva from the rabid dog, which are sufficient to transmit these diseases; the imperceptible nature of the miasms, which produce respectively syphilis, small-pox, the plague, cholera, and the instantaneous manner in which they infect the organism; for, although the morbid state is not manifested, it may be, until after the lapse of a considerable time, this only proves that internal disease requires that time to ripen and fructify, in the same manner as the flowering of the vegetable announces its maturity, or the development of the fœtus shows that conception has taken place.

The comparison of the disease to the flowering of a plant has given rise to some useful practical reflections by Professor D'Amador, which we shall here quote:—

"An individual is affected to-day with some morbid germ, but the products of the infection do not appear externally until after the lapse of four, six, eight, fourteen days, or even a month. The interval which elapses between the moment of infection and that in which the disease manifests itself, is the period of the germination and growth of the inoculated germ: it corresponds exactly to the latent and unnoticed stage during which the seed buried in the earth undergoes a fecundating incubation. The eruption, and all the other symptoms are but the development of the morbid germ, as the flowering and fructification of the plant represent the visible evolution of the germ. Hence, I affirm, that what modern pathology regards as the root of diseases—*e. g.*, the exanthemata, is the veritable, the sole cause of the terrible ravages they commit on mankind. What should we say of the agriculturist who, in order to modify the life of the tree, should direct his attention to the flowers and fruit, and neglect the roots? The therapeutists of the present day do this; and I shall leave it to your sagacity to say what will be the ulterior consequence of such conduct.

In truth, the destruction of its flowers or fruit does not cause the death of the vegetable; and thus it is with syphilis, and psora, and other eruptive diseases. To cauterize, dry up, or otherwise forcibly destroy chancres, is but to give new strength to the disease; as plants acquire fresh vigor from being pruned, and in the following spring shoot forth more luxuriant flowers. After the material destruction of their external signs, which may be regarded as the product of fructification, they send forth new flowers, which medical men have the simplicity to regard as a new disease."

The above is a brief outline of the facts presented to our attention in the paper of Professor D'Amador; but its chief interest lies in the conclusions to which the author arrives, which although somewhat opposed where theoretical, to our own physiological faith, can hardly fail to attract the attention and convince the understanding of the numerous adherents of the Montpellier or dynamic schools, which boasts of following out the principles of Hippocrates, and whose ablest exponent finds in the writings of Hahnemann the complement of the doctrines of the sage of Cos.

After adducing the well known facts of the chemical purity of the air in localities

where ague, the plague, the cholera, or epidemic diseases are committing their ravages; after observing that the contents of the poison-bag of the viper resembles in chemical composition sweet almond oil; that the pus of the pestiferous bubo, the lymph of the vaccine pustule, differ not, save in their effects, from ordinary pus and lymph; he infers that the material we subject to our analysis is but the vehicle in which an immaterial ethereal virus resides, analogous in this respect to the vivifying principle of the organized being. But we shall give his own eloquent words:

"What, gentlemen, can we conclude from all this, but that pathology resembles other branches of our science? what can we conclude, if not that a morbid cause is always, and under all circumstances, the product of a force, and that a material form in which it presents itself to our view, is but the gross covering that conceals it from us: that external forces only act on our organs when they meet with forces in us on which they can act: hence the invisible, the instantaneous character, the celerity of pathogenetic actions, whether of contagions, or of epidemics, or of the natural or artificial inoculation of diseases. In all cases it is forces which meet, combat, combine, repel, neutralize each other, or mutually regulate one another. Our health, disease, death, our very existence, is but the result of these forces. Thus it is that nature, in the immense scale of being, has sketched, as it were, an entire system of forces, and that passing from forces which are not precipient to those that are, from inanimate to living forces, she has, by gradually progressive shades, at last developed in man the supreme type of forces, and the most elevated degree of existence. In man, indeed, life does not exist solely in sensible and irritable organs, in the involuntary motions they execute, nor in the connected chain produced and maintained by the combined actions of life. In man true life consists in thought, in that intellectual something which gives us consciousness of our existence, and in that power of will which renders us masters of ourselves. Such is life at its culminating point, force *par excellence*, the greatest, the most profound, the most inexplicable of all mysteries. Life, which not only gives us the enjoyment of ourselves, but which attaches us to all that surrounds us. It is by means of it that the grand spectacle of nature attracts our attention, that our ideas dart from pole to pole more rapidly than lightning; it is by means of it that thought embraces in its grasp in a moment of time the whole expanse of worlds, all the vast extent of the universe, and loses itself in infinity.

"There is, then, in every science, and particularly in medicine, both sensible facts which are seen, and invisible facts which can only be conceived, both demonstrable and inductive facts, both facts which are apparent, and such as are more concealed, which, without being seen, regulate and govern the other facts. It is these invisible and only essential facts that alone are important, for they are the generators of other facts; and in every case that which is not seen governs that which is visible. These facts are the various forces of nature. These forces are at the bottom of all visible phenomena; they produce them, they modify them for good or for evil, and, since they are the true causes, if we modify them we shall modify the phenomena themselves. 'For the true springs of our organization,' as Buffon remarks, 'are not those muscles, those veins, those arteries, which are described with such exactness and care. There exist in organized bodies internal forces, which do not follow the gross mechanical laws we imagine, and to which we would reduce everything.' This thought has been expressed in different terms, by a man as great in the astronomical, as Buffon was in the physical sciences, whose name corresponds in France to that of Newton in England. 'Beyond the limits of this visible anatomy,' says Laplace, 'commences another anatomy whose phenomena we cannot perceive; beyond the limit of this external physiology of forces, of action, and of motion, exists another invisible physiology, whose principles, effects, and laws, it is of greater importance to know.' And, we may add, that beyond the limits of these material and voluminous therapeutics, there are other therapeutics far more important to know, and far more useful to practice.

"Thus the greatest men, of whom the sciences usually opposed in spirit to medicine can boast, are unanimous in the admission of a vital dynamism; and I imagine, gentlemen, I have a fair title for obtaining your assent to this great dogma, by placing it under the ægis of these illustrious names.

"I have thus, I conceive, proved to you that the most active agents in nature are imperceptible entities, which, like electricity, magnetism, heat, and light, have neither odor, savor, color, volume, dimensions, determinate shapes, nor definite proportions; which pervade all things without being anywhere perceptible; which govern all things without being seen themselves; which penetrate everywhere, but whose

essence we cannot penetrate. Agents of life, of health, of death, and of disease, nature has disseminated them everywhere throughout the immensity of space, under the graceful form of flowers, in the fluids which are appropriated or rejected by animals and plants. To these invisible agents, to these forces we owe our earliest breath; to them also is due our latest sigh; from them alone is derived the continuance of our existence, and they are the source of the derangements we are subject to. Physiology, hygiene, toxicology, and pathology, in other words, the sciences of life, of health, of death, and of disease, are all dependent on the same principle; for it is a force, a breath, that creates, kills, preserves us, that produces our diseases, and occasions our sufferings.

"It remains to be proved, gentlemen, that the therapeutics are, and ought to be, similar to the other departments of our art—that it is also a breath, a force, that cures and relieves our disorders. It remains to be proved, in order to trace the complete scientific circle, that the therapeutics of forces, the dynamic therapeutics, the vitalist therapeutics (for they are all the same), are likewise, of all possible therapeutics, if not the only true, at least the speediest, the surest, the most appropriate, and in the vast majority of cases, the most efficacious of all therapeutics; that they are the most rational in theory and the most successful in their practical application; that they alone ought to be, that they alone are, able to realize the three grand conditions that Celsus, even at the early period when he flourished, demanded of all useful therapeutics, to cure diseases quickly, certainly, and agreeably. In a word, it remains to be proved that if there be a dynamical, a vital physiology, hygiene, toxicology, and pathology, there ought to be therapeutics of a similar character."

After quoting some facts from Allopathic observers to prove that such is the case, among others the experiments of M. Lafarge, who has always succeeded in producing an eruption of a specific character by the inoculation of the most minute portions of laudanum—1-500th, 1-1000th, 1-2000th of a grain, and the observations of M. Soubiran with respect to the efficacy of extremely minute doses of a certain ferruginous preparation, our author goes on to say:

"But it will be said, these facts may be true, but they are repugnant to common sense. Gentlemen, if the action of imperceptible agents is opposed to common sense, that is as much as to say that experience is opposed to it; but as common sense and experience are not, and cannot be contradictory, if common sense refuses to believe in the action of all imperceptible agents, common sense stands in need of a thorough reform, which experience will be able to effect. Science, which is nothing else than the reflection of experience, has, in this manner, reformed common sense several times. Common sense believed for centuries that the world was fixed, and astronomical science corrected common sense, and brought it to its own way of thinking. The virtue of vaccine was repugnant to common sense, at the period of its discovery; but, now-a-days, experience has so completely demonstrated it, that any one who doubted it would be held to be destitute of common sense. In fine, common sense rebelled, and with some reason, against the frightful doses of the Italian school. It could not be comprehended how twenty grains of tartar emetic would not produce vomiting, when two grains caused copious evacuation; but here, again, as elsewhere, science—that is to say, experience has advantageously put common sense to rights.

"And should we, with this before us, treat with contempt a system of therapeutics which is but the application of one of our most certain maxims? To the diseased vital forces let us oppose the forces of natural substances, but divested of all material covering; these forces will thus be brought face to face; they will act directly on each other, without any interposing agent; and hence will ensue more rapid, more certain, and more agreeable cures. * * * * * Observe finally, gentlemen, that the vital therapeutics of which I speak are to medicine what the study of electricity and the imponderables has been to chemistry—that the study of motive powers has been to mechanical art. * * * * * Far from overthrowing Hippocratism, or the true vitalism of Montpellier, our modern therapeutics confirm, complete, extend, and apply it, add what was wanting to it and supply its deficiencies. The Divine Old Man bequeathed to us, so to say, the code of medicine, in which its great laws were laid down, its principles registered, its fundamental dogmas established; the work of ages is and ever shall be to deduce from these premises the most remote consequences; to bring all the great facts which subsequent discoveries may reveal and produce within the Hippocratic domain. Some of these discoveries have been already gathered in, and can never more be lost; others have been sown, and as yet exist but in the germ; but nought can blast this germ; on the contrary, it will grow, and the tree will yield its fruit to us and to all posterity."

CHAPTER XIV.

PHYSIOLOGY.

LIVING MAGNETISM.

As physicians are often assumed to know every thing on every subject, and have rarely time or inclination to contradict so flattering an assumption, they should have at least not only a general knowledge of the exact sciences, but a particular knowledge of that of their profession; including everything that may enable them to cure their credulous patients, in a speedy, safe and satisfactory manner. These considerations have induced me to investigate the pretensions of animal magnetism, as a means of increasing our knowledge, and as a therapeutical agent; and I have become perfectly satisfied of its great importance for these purposes. I have consequently introduced it into this work, and now commend it to the attention of the young men of the profession. I have also, for the above reasons, introduced incidentally the subject of phrenology, a knowledge of which, is often of great importance both to the physician and his patient.

THE state of the human system, called the mesmeric, sleep-waking or somniscient, was long known to the ancient eastern nations, who practised manipulations and employed the magnet in the healing art, like the magnetists of the present day.*

They also obtained, from persons in the somniscient state, a knowledge of the past, the present, and the future, which they regarded as perfect, and on extraordinary occasions, they proclaimed to the world from their temples the knowledge thus obtained. These temples, in which their most distinguished clairvoyants, priests and priestesses were supported by the voluntary contributions of different nations, were plundered and destroyed by the barbarians in after ages, and the art by which that knowledge was obtained, was lost in the dark periods which ensued. It was not until long after the revival of knowledge, indeed in the last century, that Dr. Frederick Antony Mesmer led the way to discoveries which have at length raised

* 'Travellers in eastern countries describe paintings found in the temples of Thebes and other ancient cities which represent persons in a sleeping posture, while others are making passes over them.' The priests of Chaldea, of Nineveh, of Babylon, of Judea and Jerusalem, and the priests and physicians of ancient Greece and Rome practised magnetism in their temples and in the healing art, long before the Christian era 'Aristotle informs us that Thales, who lived six hundred years before Christ, ascribed the curative properties in the magnet to a soul with which he supposed it to be endowed, and without which he also supposed no kind of motion could take place. Pliny also affirms the magnet to be useful in curing diseases of the eyes, scalds and burns; and Celsus, a philosopher of the first century after Christ, speaks of a physician by the name of Asclepiades who soothed the ravings of the insane by manipulations, and he adds that his manual operations, when continued for some time, produced a degree of sleep or lethargy'

the veil that so long covered the sources of those beacon lights of the ancient eastern nations.

The announcement of these discoveries excited astonishment every where at first, and then the fears of the timid, and lastly the malignity of the bigotted, who assailed and continue to assail all those engaged in their extension and diffusion. His enemies attacked Dr. Mesmer with great fury, and compelled him to flee from city to city, and at last from his country, for attempting to unfold these ancient and sacred mysteries to an ignorant world. On his arrival in Paris he appealed to the enlightened *savans* of France, who witnessed the facts he presented, investigated the phenomena, compared them with those elicited through their own researches, found they corresponded, and became converts to the long lost and newly re-discovered science.

The cool, phlegmatic, and sedate philosophers of England, looked for a long time upon these as German abstractions and French baubles, and treated them as such. But they have been, at length, driven to an investigation of the subject. This has resulted in an entire conviction of the reality of the somniscient or magnetic influence of the human system, and they have recently proclaimed it to the world through their learned societies.

This wonderful field of knowledge having been thus cleared of the hedges and spectres with which it was encompassed by ignorance and fanaticism, may now be entered with safety. We may drink at its fountains, survey its temples, and increase our knowledge of the science of that great system by which we live, move, and have our being.

It is now six or seven years since the attention of the people of this country was directed to an examination of these phenomena by M. Poyen—and about five years since I first obtained an experimental knowledge of the overwhelming influence of this agent. A few months since, a reverend gentleman of this city,* who had been long engaged in somniscient experiments, invited me to assist him in a systematic examination of the labyrinths in which the subject had been so long involved. I accepted the invitation, and at the same time suggested to him the propriety of availing ourselves of the aid of a practical phrenologist,† to which he assented.

We commenced our operations in February 1842 with the private examination of a young lady in the somniscient state. She described the brain as having large magnetic poles in the front part of the head, situated in the organs of causality *a. b.* fig. 22, also two in the cerebellum under the back part of the brain and in the organs of amativeness *c. d.*, the axes of which on a line from *a.* to *d.* and from *b.* to *c.* in the form of lines or chains crossed each other in the centre of a large pole situated in the centre of the brain, as seen in the figure. This section of the brain is made from F. to H. fig. 2 through the organs of comparison A., causality G., and

* Rev. La Roy Sunderland.

† O S Fowler, A B

through the cerebellum B to W. She described the convolutions as hav-
ing each a small pole connect'd with each other and with the large pole
in the centre of the brain as seen in

FIG. 22.

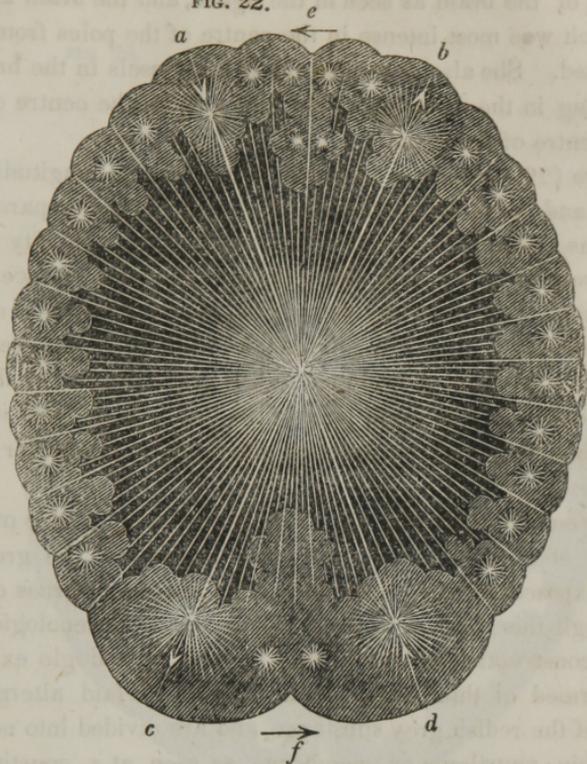
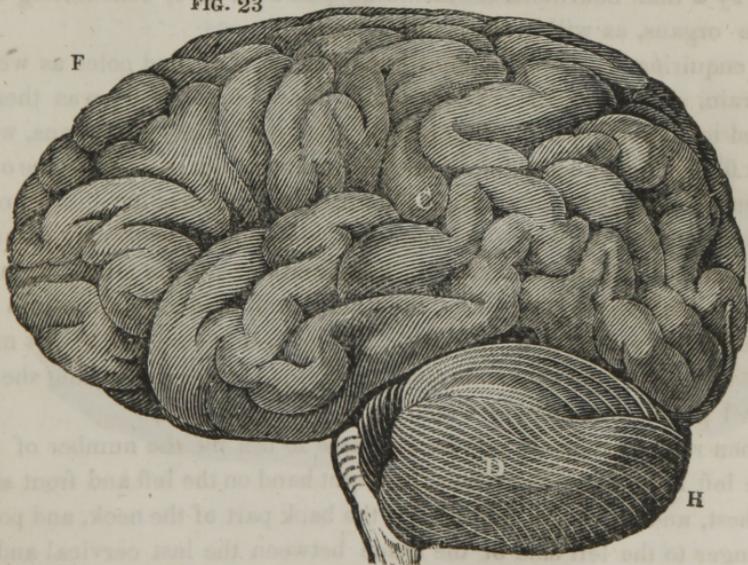


FIG. 23



in the part of the brain which the
the cerebellum B to W. She described the convolutions as hav-
ing each a small pole connect'd with each other and with the large pole
in the centre of the brain as seen in
of light which was very minute
force radiated from the poles from which the
lines radiated in the centre
pole in the centre
The figure
of the brain was
a which was
tion of the
the cerebellum
substance
ganglion
tons. The
cerebellum B
which was
which was
W. She de-
to the cere-
ganglion is
radiates thro-
the inferior
They are
this place of
part by a
double
C. radiat-
the brain
parted
she at
of the
a high
and
and
which
I then
in the
the cere-
but paper
figure vari-
which she
with she
lung, which
W. She de-

through the cerebellum *D.* to *H.* She described the convolutions as having each a small pole connected with each other and with the large pole in the centre of the brain as seen in the figure, and the brain as being full of light, which was most intense in the centre of the poles from which the forces radiated. She also described the blood vessels in the brain, and its fibres radiating in the direction of its forces, from the centre of the large pole in the centre of the brain.

The figure (22,) which is intended to represent a longitudinal section of the brain and cerebellum, may be advantageously compared with fig. *S*, which was accurately copied by Dr. Anderson of this city from a section of the brain about an inch above its base or under surface, and above the cerebellum. It gives a fine view of the convolutions, and of the white substance into which they are plunged, as well as of the great superior ganglions, *PP*, the color of which is redish grey like that of the convolutions. The centre of the great pole in the brain, is situated in the third ventricle *S*, between the great inferior ganglions *d d*, the color of which is blueish white.

When the convolutions are cut away from the outer side of the brain, to the depth of about an inch, the outer surface of the great inferior ganglion is exposed, as seen in fig. 25, The fibres and forces of the brain radiate through this surface to the convolutions or phrenological organs, the interior construction of which, may be seen by a single example at *c*. They are formed of thin plates of the white, overlaid alternately with thin plates, of the redish grey substance, and are divided into nearly equal parts by a thin neurilema or membrane, as seen at *e*, constituting them double organs, as will hereafter be shown.

On enquiring whether the other organs of the body had poles as well as the brain, she answered "Yes they all have poles." She was then requested to give us their number and situation in the different organs, which she at first declined doing from a sense of modesty, but on exciting the organ of Benevolence and representing to her the importance of the disclosures in a physiological point of view, to those that were sick and suffering from disease, and that as I was a physician, and familiar with the forms, situations and uses of all the organs, she should not under such circumstances hesitate to comply with our request. She at last consented to tell me on condition I would not allow the other gentleman to hear any thing she said, which I promised to comply with.

I then requested her in private converse to tell me the number of poles in the left lung, when she placed her right hand on the left and front side of the chest, and raised the left hand to the back part of the neck, and pointed her finger to the left side of the space between the last cervical and first dorsal vertebræ, on which she requested me to place the end of my finger while she examined the lung, when she said there was but one pole in the lung, which was very large, and situated in its centre, *F*, fig. 21.* She then

FIG. 24.

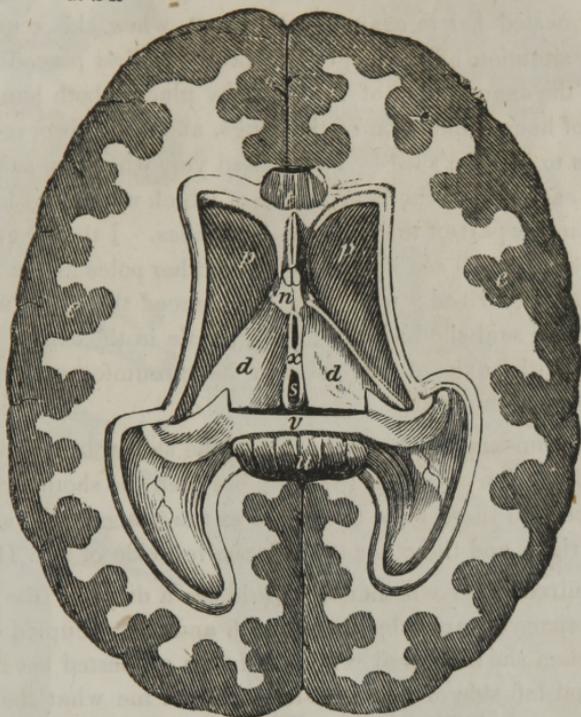
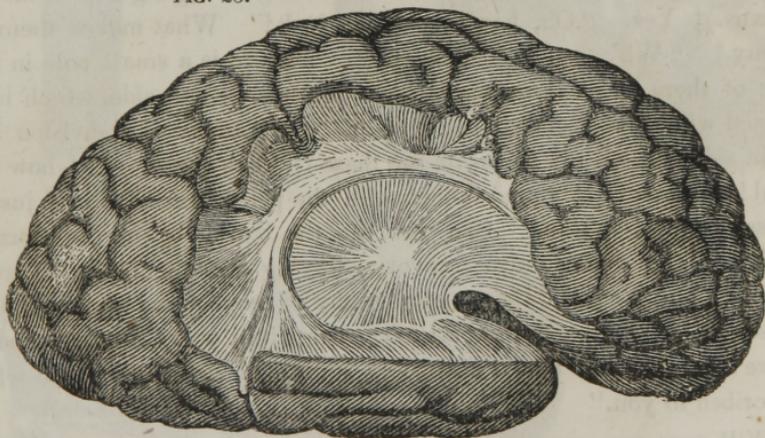


FIG. 25.



requested me to move my finger to the space on the opposite side of the last mentioned joints, and then placed her hands on the right and front side of the chest and said there was but one pole in the right lung, G; and that like the other was situated in the centre of the lung.

I then requested her to examine the heart, when she requested me to change the situation of my finger to where she first placed it, and then commenced the examination of the heart by placing both hands over it as in the case of her examination of the lungs, and soon observed "the heart has two sides to it, hasn't it?" I answered yes, when she said there were two poles in each side of the heart,—one of which was in the lower and the other in the upper part of the heart on both sides. I then requested her to examine carefully, and see if there were no other poles in the heart except those she had described; when she commenced the examination of the heart again, and said she had overlooked a pole in the centre of the heart, through which the axis of the poles in its circumference crossed each other like those of the brain.

She then commenced an examination of the stomach, and requested me to place my finger on one of the vertebræ between the shoulders, (third dorsal) when she said there were two poles in the space in the stomach, one towards the right, and the other towards the left side of it. H H, fig. 21.

I then inquired of her whether she could see a division (the diaphragm) between the space occupied by the stomach and that occupied by the lungs and heart, when she answered "Yes." I then requested her to look along the under, and left side of that division, and tell me what she saw there; when she observed, "What those round things?" (ganglions of the solar plexus.)† Yes. "Oh, how pretty they look!" What makes them look pretty? "Why they look so bright!" "There is a small pole in every one of them and a large one a little distance on one side, which is connected with them." Will you now look along under that division in the right side and tell me what you see there? "Yes I will. Oh! how beautiful! Those little round things, with the poles are there too, just like those in the left side." Can you see the bowels below the stomach? "Yes." Can you see also a covering laying over them (the mesentery or caul)? "Yes, and I see a great many of those round things in it, (the mesenteric glands) and they all have those little poles in them, and then there is a large pole that is connected with them like those above which I described to you."

Will you now examine the liver, and see whether it has any poles? "Yes. You put your finger on the side of a joint below where you had it last." I placed my finger on the right side of the space between the seventh and eighth dorsal vertebræ, when she said that was right, and proceeded to examine the liver in her usual manner, and then said "there are two poles

† AAA, fig 29,

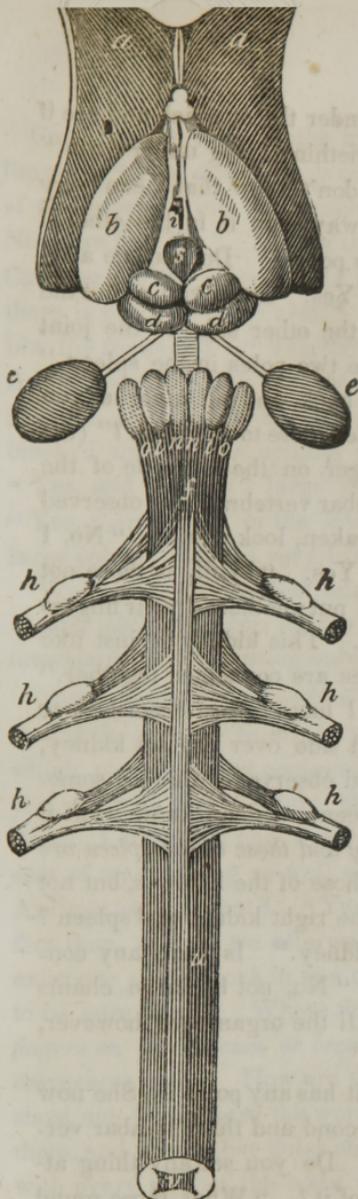
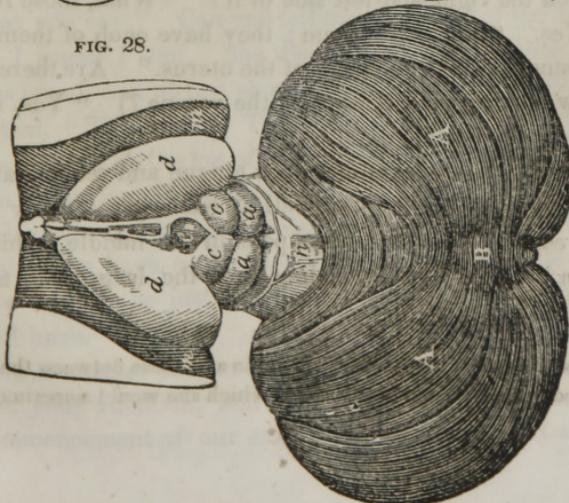


FIG. 28.



in the liver." (I.) Will you now look close under the stomach and see if you can see any thing there. "Yes, I see something lying under there." (The pancreas.) Will you describe it? "I don't know that I can very well." Is it round? "No, it is longer one way than it is the other." Do you see any poles there? "Yes it has two poles." Do you see anything lying on the left side of the stomach? "Yes. Don't you call it the spleen?" Yes. "Well, put your finger on the other side of the joint where you had it last: that is right,—there are two poles in the spleen." (J.) Will you look below the spleen, near the back, and tell me what you see there? "What that big round thing that lies close to the back?" (the left kidney.) Yes. She then placed my finger on the left side of the space, between the twelfth dorsal and first lumbar vertebræ, and observed "it has but one pole." (L.) Are you not mistaken, look again. "No, I am not mistaken,—is not this the kidney?" Yes. "Well, is there not another one on the other side?" Yes. "Well put another of your fingers on the other side of those joints. That is right. This kidney is just like the other. It has but one pole, but these poles are connected together." How connected? "By those lines or chains I have before described to you."* She then placed her hands on the left side over the left kidney, and then moved them up over the short ribs, and observed "there is something curious about the left kidney and the spleen. I don't know what it means. Oh! I see now, *the poles of the kidney and those of the spleen are connected together* by the lines or chains, like those of the kidneys, but not so large." Is there any connection between the right kidney and spleen? "No, except by the chains through the left kidney." Is there any connection between the kidneys and the liver? "No, not by large chains like those between the kidneys and spleen. All the organs are, however, connected more or less by small lines."

Will you now examine the uterus and see if it has any poles? She now placed my fingers on the spaces between the second and third lumbar vertebræ, and said, "it has two poles." (M M.) Do you see any thing attached to the uterus on the right and left side of it? "What, those round things?" (R R.) Yes. "Yes, I see them; they have each of them one pole, and they are connected with the poles of the uterus." Are there any poles low down below the uterus, (entrance of the vagina?) "Yes, there are two there,—one on each side."

Will you now be so good as to examine your tongue and see if that has any poles? "Yes, I will try to do so. Well, it has a great many little poles all round the edge of it, and a large pole in the middle, which is connected with them by little lines extending from the large pole to the little poles."

* She describes the axis between the poles of the brain and those between the poles of the other organs as looking like large bright lines, which she would sometimes call chains or *organs*.

Can you see the opening in your throat where the air passes into the lungs? "Yes, and there is one pole there." Can you see the upper part of the passage into the stomach? "Yes, and there is one pole there." No more? "No." Any in the lower part of that passage? "Yes, one." Can you see the place where the food passes out of the stomach? "Yes, there is one pole there also." Can you see any poles in the intestines, below the stomach? "Yes, there is a great many little ones in the bowels." Do you see a place towards the lower part of the bowels where a small intestine is joined to a large one, and where the intestines appear to be blocked up, so that nothing could pass through it? (Ileo-cæcal valve.) "Yes, and there is a large pole there." Is there any pole below that? "Yes, there is one in the lower part of the bowels." Is it a small or a large pole? "It is a very large one."

We have now finished our long examination of the organs, and I am greatly obliged to you for the information you have given me on this most important and interesting subject.

There is another subject of great interest among physiologists which I should be pleased to direct your attention to, and that is the manner in which our existence commences. "Well, I don't know that I can tell you. I will see." Here she paused a moment and then proceeded. "Yes, I suppose I can tell you. Our existence commences in the process of magnetising as well as every thing else I suppose, that has life." Are you sure of that? "Yes, to be sure I am." Well, is our form perfect then, and do we afterwards gradually increase in size? "No! our existence commences in one part first." Are you sure of that? "Why to be sure I am." Where does it commence first? *She then placed her fingers on the sternum or breast bone over the thymus gland, and said, "It commences here."* How are the other parts of the body formed? "Poles shoot out from where the work commences, and organs are formed round them, and then other poles shoot out and other organs are formed, and so with every part of the body, until they are all formed, and then the body grows as you say." Can you tell me what part of the body is formed last? "Yes, I guess I can. She then commenced feeling up and down her body as usual, and at last shoved her hands up each side of her head, and exclaimed, "The brain! The brain is the last formed." Well, it commences forming on the top of the brain first, does it not? "No! It begins to form in the lower part of the brain and then poles shoot up and form the phrenological organs." Astonishing! can it be possible that you, a poor blind girl, can have such knowledge, can know these things? "Yes, I do know them to be just as I have stated them, or I should not have told you as I have.

There is another subject of great interest to physiologists, to which I wish to direct your attention, and that is the law that determines the sexes in the commencement of our existence. She hesitated a moment, and then

said "I can tell you. It depends on which is magnetised the strongest." If, then, the man is magnetised the strongest, it will be a male, and if the woman happens to be magnetised the strongest it will be a female? "No! it will be exactly the reverse from what you say." Are you sure of that? "Yes, I know it is necessarily so."

There is another subject on which physiologists have different opinions, and that is, whether the separate existences of twins commences at the same time or at different times? "The existence commences at the same time, and then one may, under such circumstances, be a male, and the other a female; for the order of the greatest excitement is sometimes reversed during that time."

Can you see the form of all your organs in this state? "Yes, to be sure I can." The inside as well as the outside of the organs? "Yes, and I must of course, you will see, see every part of them, or I could not tell the situation and number of the poles in the organs." Do you know any thing of anatomy in your natural waking state? "No, nothing of any consequence. I have been blind from my infancy, and how could I know any thing of anatomy."

Is there any connection between the poles of the uterus and the breasts, or mammæ, besides that of the nerves? "Yes, they are connected by those large lines or chains I have described to you. One of them is connected with the poles of the uterus on one side, and with those of the breast on the other; and they consequently cross each other."* There is no such connection between the uterus and stomach. "Yes there is the same kind of connection between the poles of the uterus and those of the stomach, and they cross each other in the same manner." Why did you request me to press on the vertebræ while you was ascertaining the number of the poles in the organs? "Because I could tell the situation and number of the poles better when you was pressing there." How could you tell better when I was pressing there? "Because the nerves there are connected with the poles of the organs." Do you see how the spinal nerves are connected with the spinal marrow, that great cord that is connected with the brain, and extends down through the joints of the back bone? "Yes, those nerves are some of them connected with the front and some with the back part of it." (*h h*, fig. 26.) Do you see any thing on the nerves connected with the back part of it near the joint? (ganglions of the spinal nerves.) "Yes, I see a bunch or round thing that has a small pole on it on each nerve." You see the same things on the nerves that are connected with the front part of the spinal marrow? "No I don't. There is no bunch or round things on them like those on the back part." There ain't ha? "No, not that I can see. If there is any there I can't see them." Miss, I have done with you now, and you can now speak to Mr. Sunderland, who wants to talk with you about the phrenological organs. "How

* See note K page 219.

do you do Mr. Sunderland? (Taking him at the same time by the hand and shaking it heartily.)

These extraordinary revelations excite the greatest astonishment in the minds of anatomists and physiologists, who are the best judges of their correctness. A question may be very naturally suggested that might lessen their importance in some degree in the minds of some persons, and that is whether she could not possibly have received some of her knowledge, at least, through my mind.

In answer to this question I can state, first, that such an objection was felt and anticipated before the examination was commenced, and every precaution that was suggested to my mind was taken advantage of to prevent such a result. She was separated entirely from a person who had a most extraordinary influence over her in the mesmeric state, and I magnetised her the first and only time for the above examination to prevent or lessen any influence Mr. Sunderland might be supposed to have over her mind who had been in the habit of magnetising her. Besides I had long been in the habit of changing my mind in an instant from one subject to another,—I had long trained myself to it, and endeavoured to exercise it in the above examination in such a manner as to prevent her from learning any thing from me, and so much so that in the last question I tried hard to impress upon her mind a belief that there were ganglions on the motor or spinal nerves connected with the front part of the spinal cord.

Again she described the connection between the left kidney and spleen, a fact I had so entirely forgotten as to be induced to examine the books to see if there was any visible connection between them. But a circumstance occurred which settled this question fully and satisfactorily, for we commenced an argument with her, and tried with great earnestness to induce her to yield her opinion, but without the least effect.

I afterwards commenced an examination of an educated lady, magnetised by Mr. Sunderland, and went through the examination in the same manner I did with the above mentioned girl, and with the same results. She confirmed in the most minute manner the number and situation of the poles in the brain, lungs, heart, stomach, pancreas, plexuses, mesentery, liver, spleen, kidneys, uterus, ovaries, tongue and orifices, and the connection between the left kidney and spleen, and also the connection between the uterus and breast, and the uterus and stomach, &c. &c. Mr. Sunderland then commenced an examination of the joints of the limbs and spine each of which she said had two poles, one for extending and the other for flexing the body and limbs, when Mr. Sunderland commenced demonstrating that fact, by exciting the different or positive and negative poles of the elbow joint, situated at the points of the insertions of the muscles, one near the upper and the other near the inner side of the condyle of the humerus, when she would extend and flex her arm, alternately, by exciting in the slightest manner the different poles. He produced the same result by ex-

citing the different poles of the wrist, on the opposite sides of it, and also by exciting the different poles on the opposite sides of the joints of the fingers.

He then held the point of a penknife near the organ of causality, on the right side, when she began to move her head from it. He then held it near the same organ on the left side, when she began to move her head towards it, and on inquiring the cause of her doing so, she answered "It pulls, oh! take it away." He then held the point of the knife near the organ of amativeness, on the right side, when she again observed "it pulls." He then held it near the same organ of the left side, when she soon began to move her head from it, and on inquiring why she did so, she observed "it pushes."

On holding the point of the knife over the top and centre of the brain, she soon cried out as before, "it pulls," thus demonstrating an exact correspondence in the number and order of arrangement of the different poles in the brain, with that of the magnetised disc. fig. 21.

She gives a charming description of the magnetism of the brain, in which she says it appears very light, the intensity of which is greatest in the centre of the poles, from which bright lines radiate in every direction like rays of light: that there is one small pole in each organ of the brain, besides those in the organs of causality and amativeness, which she describes as being comparatively very large, and the great pole in the centre, connected every where with those in the circumference, and they with each other.

On directing her attention to the color of the brain, she said the inner part of it was very white, and the outer part around the little poles in the organs was of a redish color, and besides there was two bodies of the same redish color on each side (great superior ganglions) near the centre of the brain and a little forward of the centre of the great pole.

On a second examination in the same somniscient state, I directed her attention to the appearance of the top of the brain, which she described as having an uneven convoluted surface, when I presented her with the plate of the top of the brain fig. 1, printed with a very light or pale red ink, which she placed over her stomach, and said the top of the brain looked very much like it. I then requested her to tell me the color of the plate she was holding over her stomach, when she answered it was "a very light red or flesh color." I then presented her with the side view of the brain and cerebellum fig. 2 printed with the same ink, which she applied to the stomach, and said it looked very much like the side of the brain, and recognised the cerebellum and the color of the plate as before. She also noticed the situation of the cerebellum in which she said the large poles in the back part of the head were situated. I then requested her to tell me whether there were any other poles in the cerebellum, except the large ones she had described, when she answered, "Yes, there are two small

poles between the large poles in the back part of the cerebellum." (See the vermicular process, or processus vermicularis) B, fig. 28.

On directing her attention again to the great superior ganglions, *a a*, fig. 26, she said there was one small pole in each, in front of the centre of the great pole in the brain, and one very near the back part of it, in a little body of a redish color (pineal gland *s*, fig. 26,) like that in which the two little poles were situated, in front of the great pole. I then inquired whether she could see any thing just behind the little redish body with one pole, when she answered, "yes, it looks hubby there." (See quadrigeminal bodies *c c*, *d d*, fig. 26.) Can you see the upper part of the spinal cord connected with the brain? "Yes." Are there any poles in it? Yes, there are two in it, in little round or oval bodies, (olivary bodies *a a*, fig. 6, *i i*, fig. 26.) Are there no other poles there? "I can't see any more there." Can you see the large nerves along the back part of the spine connected with the spinal cord? "Yes." Can you see any thing on them, or connected with them near the spine? She hesitated a moment and then said, "there is a place in each nerve there, that bulges out, and they look very light there, *h h*, fig. 26. They glow with light, but I cannot see any poles in them distinctly."

I want you to look now and see whether you can see any one nerve extending from the brain along down the neck and front side of the spine." (Great sympathetic nerve *D D D*, fig. 29.) "Yes I can, and it has little small bulges in it." Can you see any thing in those small bulges? "Yes, I see a small pole in each one,—that's all." What is that nerve connected with? "It is connected with those little places that bulge out. Does it connect with any thing else? She hesitated, and then said "nerves go out of those little bulges to the organs." Do any of them go out to the spine? "Some of them go to the spine, or some of those in the spine go to them, I don't know which." Can you see where that long nerve you have been describing is connected with the brain? "Yes, it is connected with it just back of that *hubby* place." (*c c*, *a a*, fig. 28. It is connected with the brain at *n*, fig. 28.)

Can you see the centre of the great pole in the centre of the brain? "Yes, it looks like a little stem and very light." How does it look around it? "Very dark."

She places the centre of this great pole of the brain in the centre of the third ventricle, A, fig. 5; *s*, fig. 24; *i*, fig. 27, between the great inferior ganglions *b b*, where it will be seen I had long since traced it by a comparison of the direction of the fibres of the brain (fig. 5, 6, 7,) with the direction of the forces in the magnetised disc. fig. 8.

You told me in our last examination that the poles of the uterus were connected with those of the stomach and those of the breasts, and that each connection crossed each other, and will you now tell me whether there is

a pole at each of those places? "No, there is no poles where those lines cross each other."

I now placed my finger over the parotid gland, 8, fig. 17, directly under the lower point of her ear, and enquired whether she saw any thing under my finger, when she answered, "yes, I see a little round thing under there." What else do you see? "I see a little pole in it, that's all." Do you see any of those little round things along the side of your neck here? "Yes, I see a string of them along my neck and all the way down in front of the spine. There is a string of them on the other side too, and there is a little pole in every one of them." Astonishing! These are lines of, or as we call them ganglia of lymphatic glands, extending from the ears to the lower part of the sacrum, called cervical, dorsal, lumbar, and sacral glands, because they extend along the front of all these vertebræ, B B, fig. 21.

I placed my fingers over the thyroid glands, on the sides of the trachea, T, fig. 29, when she said "there was one small pole in each gland," and on moving my fingers over the submaxillary glands under the jaw, she observed that each of them had one pole.

I now directed her attention to the brain again, and inquired whether she could observe any motion in the brain, when she answered, "oh! yes, the brain is constantly in motion." (Synchronous with that of the heart.) Yes, I know the brain is constantly in motion from the action of the arteries, but I want to know whether you can see any motion when you are thinking or speaking, along the fine lines which radiate from the centre of the large pole in the brain to its convolutions or organs? After a pause of two or three minutes, she answered, "yes, I see a motion along those lines when I am thinking." Can you see the nerves in your arms? "Yes, I see them very plain." Raise your arm and tell me whether you can see any motion along the nerves when you are moving it. "Yes I can." Which way do you see the motion? "Up so," (pointing from her hand towards her shoulder.) Now move your arm down. Did you see any motion then along the nerves? "Yes, it moved down." How do you know there is any motion along the nerves when you think, or when you move your arm? "Because it looks *lighter* where it is moving along the nerves."

You told me the last time you was in this state that there was one large pole in each eye, and will you now tell me where they are situated, whether in the back, front part or sides of the eye? She hesitated a moment and then said, "they are situated in the middle of the eye. Isn't there a round, or oval thing in the middle of the eye that looks very clear?" Yes. "Well the poles are there, in the middle of those round things," (the lens.)

You say the poles in your eyes are large poles. "Yes." Are they as large as those in your stomach? "No, not quite so large." You say

you see with your stomach, and now will you tell me how you see with your stomach? "I see with the poles of my stomach." As you do with your eyes when you are awake? "Exactly so." Are the poles in the sides of the stomach, or in the space in the stomach? "They are in the space in the stomach." Whereabouts in that space? "Here," (placing her forefingers on the stomach, and each about two inches to the right and left of the median line.)

Do you know any thing of anatomy in your natural waking state? "No, nothing."

On a third examination in the same somniscient state, Mr. Sunderland enquired of her what she felt with, or what the sense of feeling was in; whether in her skin, flesh or bones; when she answered, "No, it is not in either of them." What then do you feel with? "I don't know." I then took hold of her hand, and when pinching one of her fingers enquired, where does the sensation of pinching go to? "It goes along up my hand and arm to my head." How do you know it goes there? "Because I can see a motion along the nerves from the pole where you are pinching my thumb to the brain." How can you see a motion along the nerves? "Because it is lighter where it is moving along."

What part of the brain does the sensation go to? "To the middle of the brain I believe." Well, the magnetic forces move along the nerves as you have before described? "Yes they do." Are not the sensations then in those forces? "Yes, to be sure they are?" Then do you not feel with them? "Oh! of course I do."*

Her attention was now directed to the two small poles between the large poles of the cerebellum, (fig. 28,) by Mr. Sunderland. She observed to him, "There are two small poles there between the large poles." Where is the organ, or organs to which they belong? "Here," (placing her finger on the lower part of the projection of the skull in the hollow of the neck.) Is there any connection between those small poles and that organ? (p. 226.) "Yes there is." What organ is it that enables you to move first in one direction, and then another,—to raise your arm, or move it down? She hesitated a moment, and then placed her finger on the same organ again, and said "it is here." (See the opinions of Dr. Vimont, Solly, Reil, Gall, Spurzheim, Combe and Broussais, on the *processus vernicularis* B, fig. 28, in which these small poles are situated. Motive Power of Organic Life, page 62, 63.) Do you know the situation of the different organs of the brain? "No, I don't know the situation of any of them." Is not that you have just had your finger on the organ of motion? "Yes, I suppose it is."

This lady's countenance and manner had been constantly very serious

* This fact is demonstrated in various experiments upon persons in this state, and is on many accounts a very important addition to our knowledge.

and in fact very solemn during the time occupied in these examinations, and he now determined to produce a change in both if possible. He accordingly excited the organs of ideality first, 20, p. 216, and then mirthfulness, 19, when she began to smile and then pulled his fingers away from that organ. He then excited the organs of time, 13, and then of tune, 14, when she began to sing with a full voice and with great melody. When she had finished the song, he invited her to take a seat at the piano, which invitation she accepted with great eagerness, and astonished and delighted us, with the deep toned melody of her voice, and of the piano. She then played three or four of her favorite and lively tunes, unaccompanied with her voice, in a manner that has been rarely if ever equalled.

The results of these examinations are the most extraordinary and the most important to mankind of any that has been obtained on any subject in modern times.* The commencement of our existence in a simple magnetic phenomenon, and the development of the manner in which the organs and limbs are successively formed and moved, as disclosed in the somniscient state, is a beautiful example of the order and simplicity of manner in which nature uniformly executes her work; and motion in man, it will now be conceded, is the result of his organized and consequently powerful magnetic forces like that in other organized bodies, according precisely with the theory I have long since taught and demonstrated on the magnetised rings, and not to the feeble capillary attraction and repulsion of inorganic bodies, called endosmos and exosmos, as taught by modern physiologists.

The magnetism of the human system as disclosed by these examinations, requires a very extended commentary, for which I have no room in this work, and which must consequently be deferred to a future period. I can therefore only allude to a few facts, the novelty or importance of which may not be noticed or understood by the reader. One of these is the situation of the great pole *i*, within the triangle formed by the small poles in the pineal gland (ganglion) *s*, and the great superior ganglions, *a a*, fig. 16, and the division of the brain and cerebellum into four equal parts by the magnetic equators *ef*, and *rs*, fig. 22, (see the poles, axes and equators in the magnetised disc. fig. 8, page 19.

The sensations are in the magnetic forces, and are attracted from the different parts of the body along the nerves and spinal marrow to the centre of the brain, and from thence along its fibres to its convolutions, the reservoirs of the inclinations, which are inherent in and belong to the sensations, like the expansions to repulsions, and the contractions to the attractions of these forces.

* Mr. L. N. Fowler, Phrenologist, who was present at one of these examinations, informs me that he has since examined two boys at Boston, in the somniscient state, on the subject of the number and situation of the poles in the organs, with the same results as those obtained in these cases. He has since obtained the same results in the case of a young lady—a natural somnambulist, and the best clairvoyant he ever saw. See Phrenological Journal, Feb. No., 1843. Professor Gibbs of Columbia, S. C., has also repeated these experiments with the same or very similar results.

The Magnetiser should have a knowledge of the number and situation of the poles of the organs; for it is these poles on which he acts—the action of which he increases or lessens by his manipulations.

In the act of thinking, these forces move from the great pole in the centre of the brain, to the convolutions or phrenological organs, and from these intellectual organs to the great pole in the centre. We therefore think by the action of these forces, and our *will* or the engineer which determines our actions, by the directions of our inclinations, must consequently be situated in the pole in the centre of the brain.

The heart, the great centre of motion of the system, is magnetised with *five* large poles like the brain, by which motions are produced in this organ, and extended to every part of the body. The other organs have poles for the purposes of digestion, secretion and excretion, &c. and the orifices of the alimentary canal for the purpose of opening and shutting them, and for attracting the fluids or semi-fluids along these tubes.

Number of large poles in the organs.—Brain, 5 ; eyes, 2 ; ears, 2 ; lungs, 2 ; heart, 5 ; stomach, 2 ; liver, 2 ; spleen, 2 ; pancreas, 2 ; kidneys, 2 ; bladder, 2 ; uterus, 2 ; ovaries, 2 ; vagina, 2 ; breasts or mammæ, 2 ; solar plexus, 2 ; mesentery, 2 ;

The *orifices* have each one large pole, viz :—Tongue, 1 ; larynx, 1 ; pharynx, 1 ; cardiac orifice of the stomach, 1 ; pyloric orifice do. 1 ; ileo-cæcal valve, 1 ; anus, 1 ; and one in each convolution of the intestines.

The *ganglions of vegetative life*, or those connected with the great sympathetic nerve, including those of the solar plexus, have each one small pole.

The *ganglions of phrenic life*, or those of the brain and cerebellum, *e e*, fig. 29, including the olivary bodies, *i i*, and ganglions of the spinal nerves, *h h h*, have each one small pole.

Secreting system.—The lymphatic glands of this system, including those of the mesentery, have each one small pole, fig. 24, 5, 6, page 7,

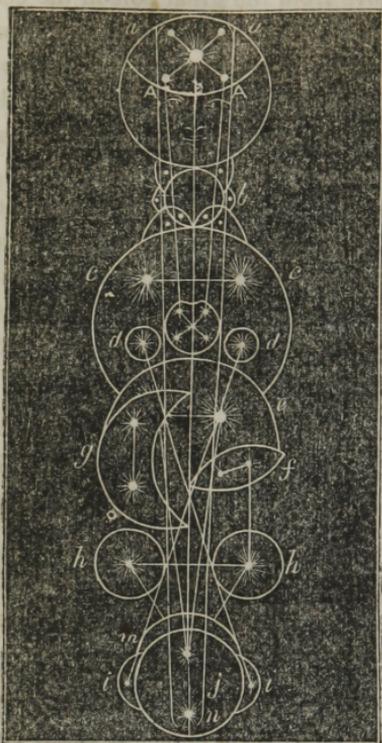
These poles are alternately negative and positive, and not only secrete a fluid in these glands, but change its negative and positive character alternately, and at the same time attract the fluid secreted along the lymphatic vessels to the heart.

Excreting system.—There are no poles discovered in the mucous glands of the mucous membranes, or in the skin, in the somniscient state, but numerous nerves are seen to terminate in these membranes, and in the skin.

The *convolutions of the brain*, or phrenological organs have each one small pole.

NOTE K.—I have now (Sept. 30, 1842,) a case of tubercular disease of the *ovaria* of the right side, in a lady aged 27 years, in which the breast or mammæ of the left side is not half as large as that on the right side. I have now also a case of tubercular disease of the *ovaria* of the left side of a lady aged 20 years, in which the breast of the right side is not more than half as large as that on the left side. The disease in both of the cases commenced at the age of puberty, or the first appearance of the catamenia, and the first has terminated in dropsy. These symptoms, which are the consequence of the direct magnetic connections between the breasts and the ovaria, and to which my attention has been directed by the discoveries of clairvoyants, are very important, as they will enable us to distinguish without difficulty, disease of the ovaria from that of the uterus. I have now (March 1, 1843,) eighteen cases in which I find this symptom is constant and uniform.

MAGNETIC POLES IN THE ORGANS.



A A—poles in the organs of causality. *a a*—poles in the organs of amateness, Arbor vitæ. *b b*—cervical glands. *c c*—lungs. *d d*—mammæ, or breasts, and heart. *e*—stomach. *f*—spleen. *g*—liver. *h h*—kidneys. *i i*—ovaria. *j*—uterus. *m*—cystis. *n*—arbor vitæ. *a n*—axis between these poles.

The importance of a knowledge of the magnetic organization of the human system, is greatly increased by the introduction of the Rotary Magnetic Machine into practice, as it is on that organization which the instrument acts. In magnetizing the organs, it is necessary, in most cases, to place one of the buttons on the posterior spinal nerves connected with them, while the other is moved over the organs. In some cases, however, one button should be placed directly over one pole of an organ, while the other is over the spinal nerve connected with it. There are other cases, in which one button should be placed over the pole of one organ, and the other over the pole of another organ; and again, there are cases in which one button should be placed over one pole of one organ, and the other over an organ of the brain. There are also many cases in which the buttons must be placed over different phrenological organs, and hence the necessity of a knowledge of their relative situations.

We have traced these poles through the spinal nerves, under a very moderate power of the instrument, and also direct magnetic axis, between poles of the same and of different and distant organs, as seen in the above figure; which accounts for the direct sympathies that are known to exist between distant organs, in the most satisfactory manner. The direct magnetic connection between the stomach and spleen, and the spleen and left kidney, accounts also for the introduction of some fluid into the kidneys, through a medium other than that of a general circulation.

There are other large poles in the abdomen, besides those represented in the above figure—there are two in the solar plexuses, and two in the mesentery, surrounded with satellites. There are also two poles in each joint, including those of the spinal column, with axes connecting *antagonist* muscles, a knowledge of which, and of these muscles, is indispensable to a scientific and successful application of the buttons, in magnetizing for lateral, anterior, and posterior curvatures of the spine, acute and chronic rheumatism, paralysis,* &c.

* There is also one large pole in the palm of each hand, and a larger one in the hollow of each foot.

CHAPTER XV.

PHRENOLOGY.

THE truth of the science of phrenology is fully confirmed by persons in the somniscient state. The change in the natural language depicted upon the countenance, expressive of different inclinations, when the different phrenological organs are excited in this state, are in many cases perfect and inimitable, and demonstrate in the clearest manner the plurality of the organs of the brain. These changes led Mr. Sunderland to suspect the existence of small sympathetic poles in the muscles of the face connected with these organs, the truth of which was fully established by subsequent examinations of the subject, in which Messrs. Sunderland and Fowler in the examinations mentioned in the last chapter, traced these connections between these organs and small sympathetic poles in the muscles of the face, and disclosed the cause of the phenomena on which the science of physiognomy depends. They also traced the same kind of connection between the poles of the other organs of the body and small corresponding sympathetic poles in the muscles of the face, which gives a clue to a knowledge of the different temperaments of different individuals.

The influence existing between the poles of the organs, and these little sympathetic poles of the face, is more or less reciprocal, for the poles of the former are affected in a greater or less degree by exciting the latter.

The superior knowledge universally manifested by clairvoyants in the somniscient state, was very apparent soon after the above gentlemen commenced the examination of the phrenological organs of the Lady in this state, who knew little or nothing of phrenology in her natural waking state; for we were surprised to hear her giving lectures to Mr. Fowler, himself a distinguished phrenologist, on the character of the different organs, in which she displayed and demonstrated a knowledge of the science, which was apparently perfect, and in many cases cast Mr. Fowler's knowledge of the subject entirely in the shade.

On enquiring of her in her calm somniscient state, without any excitement of the organs, whether she knew any thing of the spirit which animates us, she answered "yes, it is the magnetic *spirit* which animates us, as well as every thing else."

The divine Plato says, "It is not art which makes thee excel, but a *divine power* which moves thee, (the air) such as is in the stone which Euripides named the magnet, and some call the Heraclian stone which attracts *iron rings*."*

* Johan. Kirekman, *de Annulis*, p. 129; PLATO in Ione.

This is the doctrine which was taught to those who were initiated in the greater mysteries in the Temples of the eastern nations according to Musæus, who had been *hierophant* or chief priest of a Temple at Athens, and who opens to us the hidden doctrine of perfection taught there, in the sublime words :

“ First then, the divine *spirit* within sustains the heavens, the earth, and watery plains, the moon’s enlightened orb, and shining stars ; and the *eternal mind*, diffused through all the parts of nature, actuates the whole stupendous frame, and mingles with the vast body of the universe. Thence proceed the race of men and beasts, the *vital* principles of the flying kind, and the monsters which the ocean breeds under its smooth crystal plain.”

On exciting the devotional organs, or those of veneration, (28, p. 226,) marvelousness, (23,) and sublimity, (21) she passed into the extatic state, or that of a glorious prevision of the gorgeous scenery and resplendent light in heaven,—of its departed spirits and Elysian Fields, which she expressed in a tone of sincere and ineffable delight, accompanied with a harmonious natural language that defied imitation.

These previsions of the heavenly abodes of the just, were obtained in the ancient Pagan Temples after initiation, in the same manner they were obtained by this Lady, and are thus described by the divine Plato.

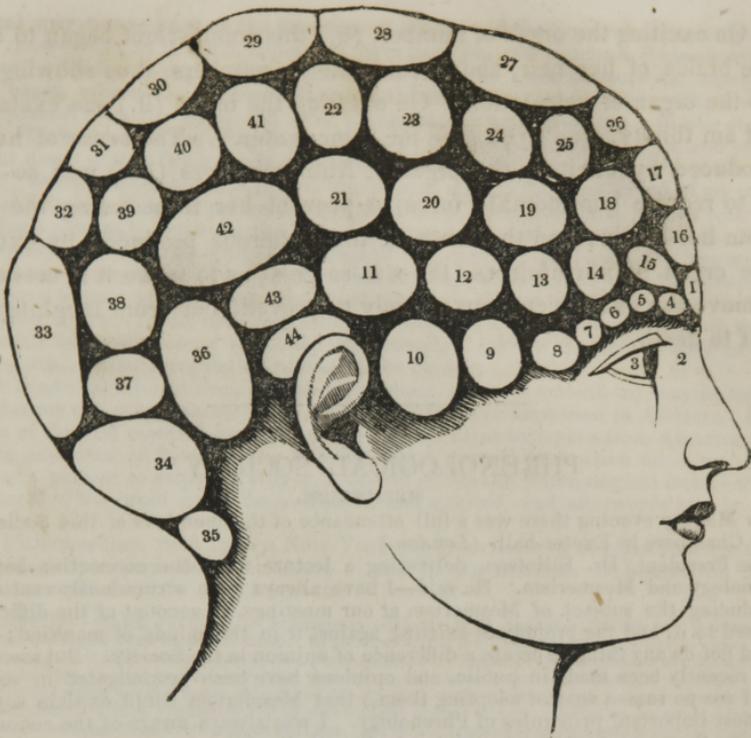
“ But it was then lawful to survey the most splendid beauty, when we obtained together in that blessed choir, this happy vision and contemplation. And we indeed enjoyed this blessed spectacle together with Jupiter,* but others, in conjunction with some other god ;† at the same time being initiated in those mysteries, which it is lawful to call the most blessed of all mysteries. And these divine orgies were celebrated by us, while we possessed the proper integrity of our nature, and were freed from the molestations of *evil which awaited us in a succeeding period of time*.‡ Likewise in consequence of this divine initiation, we become spectators of entire, simple, immoveable, and blessed visions, resident in a pure light ; and were ourselves pure and immaculate and liberated from this surrounding vestment, which we denominate body, and to which we are now bound like an oyster to its shell.”

Clairvoyants represent themselves to be pure and immaculate, and separated from the earthly body here below when inspecting the heavenly mansions above. Proclus in commenting upon this beautiful passage in the Phædrus, observes, in Theol. Plat. lib. 4, p. 193, “ That initiation and inspection are symbols of ineffable silence, and of union with mystical natures, through intelligible visions !”

* That is the sun under the name of Jupiter.

† Solar influences under the names of Ceres and Proserpine in Athens, Castor and Pollux in Amphissa, Vulcan in Lemnos, Bacchus in Bœotia, Venus in Cyprus, &c. &c.

‡ The irruptions of the barbarians, and the destruction of their Temples.



- | | |
|-----------------------|---------------------------|
| 1. Individuality | 23. Marvellousness. |
| 2. Form. | 24. Imitation. |
| 3. Language. | 25. Suavity. † |
| 4. Size. | 26. Penetration. † |
| 5. Weight. | 27. Benevolence. |
| 6. Colour. | 28. Veneration. |
| 7. Order. | 29. Firmness. |
| 8. Calculation. | 30. Selfesteem. |
| 9. Thirstiness. † | 31. Concentrativeness. |
| 10. Alimentiveness. | 32. Inhabitiveness. |
| 11. Acquisitiveness. | 33. Philoprogenitiveness. |
| 12. Constructiveness. | 34. Amativeness. |
| 13. Tune. | 35. Voluntary Motion. † |
| 14. Time. | 36. Combativeness. |
| 15. Locality. | 37. Connubial Love. † |
| 16. Eventuality. | 38. Adhesiveness. |
| 17. Comparison. | 39. Ostentation. † |
| 18. Causality. | 40. Approbativeness. |
| 19. Mirthfulness. | 41. Conscientiousness. |
| 20. Ideality. | 42. Cautiousness. |
| 21. Sublimity. | 43. Secretiveness. |
| 22. Hope. | 44. Destructiveness. |

NOTE.—See first part of page 142, and Note.

On exciting the organ of number, (8,) this somniscient began to count the braids of her hair, and to calculate by numbers, thus showing it to be the organ of calculation. On exciting the organ (9,) she exclaimed "I am thirsty, won't you give me some water." The sense of hunger produced by exciting the organ of Alimentiveness (10,) was so great as to require considerable force to prevent her from eating the flesh from her hands; and the sense of the ludicrous produced by exciting the organ of mirthfulness (19) was so great as to make it necessary to remove the excitement immediately to prevent her from laughing her self to death.

PHRENOLOGICAL SOCIETY.†

MESMERISM.

ON Monday evening there was a full attendance of the members of this Society, at their Chambers in Exeter-hall. (*London.*)

The President, Dr. Elliotson, delivering a lecture upon the connection between Phrenology and Mesmerism. He said—I have always been scrupulously cautious in introducing the subject of Mesmerism at our meetings, on account of the difficulties opposed to it, and the prejudices existing against it in the minds of mankind; and I would not do any thing to create a difference of opinion in the Society. But assertions have recently been made in public, and opinions have been promulgated in society, (and I see no reason against adopting them,) that Mesmerism could explain some of the most important principles of Phrenology. I was always aware of the connection between them, as mesmerism relates to the whole of the nervous system, of which Phrenology explains one part. There is the less objection to my introducing the subject here at present, as the Society for the Diffusion of Useful Knowledge, with Lord Brougham at their head, and four of my late colleagues at the London University, who worried me at the University Hospital, have now borne public testimony to the reality and usefulness of Mesmerism. This they have done in the last monthly number of the *Penny Cyclopædia*. What is more remarkable, they have borne their testimony just as strongly, and just to the same extent, as I have done in my *Physiology*; for I have said no more than that one person can influence another in various ways, without the will or consciousness of the person influenced; that so one person can send another to sleep, and again awaken the latter at pleasure; and that he would know nothing of what might happen in the interval. I have said that this can be done not only without the knowledge, but even against the will. But I was at last compelled to admit more than this. I was compelled from what I witnessed to admit that persons thus influenced were rendered insensible to pain, even to that of severe burning, and of sharp

* It is now ascertained that this result is the consequence of exciting opposite sides of the same organ, which is properly that of calculation (9); and on a comparison of the great and fatal disparity in the results, both in the number and situation of the new phrenological organs, obtained in exciting different parts of the brain, by Messrs. Fowlers, Sunderland, Buchanan, and King, they are now satisfactorily accounted for, with a very few exceptions (marked †,)—some by their having excited opposite sides of the same organ, and others by their having excited portions of different organs at the same time.

† I copied into the third, fourth, and fifth editions of "The Motive Power of the Human System," an account of the proceedings of this meeting, from "The Magnet," in which the names of Dr. Buchanan, and Dr. Collyer, with other matter in connection, was omitted, and to which my attention has been recently directed by the friends of those physicians; an error which I take the earliest opportunity to correct, by copying the article directly from the "London Phalanx," and which I am well informed corresponds with that published in the "London Sun."

surgical operations—such as the insertion of setons, and the removal of tumours. Yet to all these—mad as it must appear—I have been obliged to admit “vision without the eye.” Mad as it may appear, I have seen it in the most unequivocal manner in three cases, where the eyes were blindfolded with the utmost care. Thick cloths were placed over the eyes, and were pressed down with eye-cups. In one of those cases, which occurred the other day at Paris, I put soft wool over the eyes, and pressed it tight down with a thick bandage of new cloth, and filled up all the intervals with wool. When the patient was in this blindfolded state, I took papers out of my pocket and held them before the patient, out of the line of vision, and that person read what was there printed! Such are the facts which are admitted in this article of the *Penny Cyclopædia*. I was also obliged to admit of “prevision,” at least as to the state of the persons themselves. I have not known anything which could be called prophecy but I have known persons to predict what would be the state of their own health at particular times. I will not enter into any speculation as to this—whether it may be accounted for by supposing that they did actually foreknow the future state of their own health, or that imagination produced the change.

But I have mentioned these things, Gentlemen, more to smooth my way in relating occurrences of a more extraordinary nature, which have happened in America. In the course of the last month I have received a series of newspapers from America, containing accounts of Mesmerism, from which it seemed that when an operator had reduced a patient to a state of stupor, he could excite the phrenological organs at will, that parts of the brain could be awakened and excited, and afterwards sent to sleep again.

Dr Elliotson then read from a New-York paper an account of numerous Mesmero-Phrenological experiments performed at and in the Museum of Louisville, by Dr Buchanan and others.* We insert the following:—

“August 7th.—At ten o'clock, A. M., in company with Dr. H. H. Sherwood, of this city, I went to the Museum, and found Miss M. at the piano. In the course of a few moments she was put to sleep, when the following most interesting experiments were performed. I had not communicated my design to Mr. Peale, or to Miss M., and hence it is certain that there could have been no collusion between them. She was directed to play several tunes, which she did, stopping various times, when a sign was made by Mr. Peale to himself. I then requested him to wake up the organs of *tune*. He did so, by simply reversing the motions with his thumbs over those portions. He then directed her to play one of her favorite tunes. ‘The Old Arm-Chair.’ She attempted, but immediately said, she ‘could not remember the air!’ She said she could remember the *words*, and repeated them; but could not play the *tune*.

“I next requested him to Mesmerise the organs of *tune* again; and to reverse the motions over the organs of *language*. He did so, and then requested her to play. She commenced the tune, but could not repeat the *words*. Mr. Peale tried various ways to induce her to repeat the words, but she as often signified her inability to remember them. I then pointed out to him, without speaking, the organs of individuality, and requested him to wake them up also. He then questioned her, and she declared herself unable to tell the name of any person, not excepting her own.

“He then re-Mesmerised these organs, and reversed the motions over the organs of *tune* and *eventuality*; after which she could not tell how old she was, or any *event* connected with her life; and in reply to various questions which Mr. Peale put to her, she invariably declared that she had forgotten, or did not know!”

Dr. Elliotson then read very long extracts from the Boston and Kentucky papers, which related a vast number of public experiments of similar nature, and with similar results, performed by Dr. Collyer, Dr. Buchanan, and others. In each case, it is represented that the organs, as named by the Phrenologists, invariably manifested, under mesmeric influence, the functions attributed to them. The relations excited the greatest surprise in the meeting, and were listened to with deep attention. He then stated that whilst these things were proceeding in America, experiments precisely of the same character and effect were carried on in different parts of England, by gentlemen who knew nothing of the operations of each other, or of the operations of those going on in America. He had sent down copies of the American papers to Hampshire, to Dr. Engledue, with a request that he would hand them to Mr. Gardiner, a gentleman of the highest respectability and learning, the son of Sir James Gardiner, an old member of this Society. It happened curiously enough, that when Dr. Engledue went over to Southampton, to give the packet of papers (which he himself had not opened) to Mr. Gardiner, he found that gentleman, Mr. Mansfield, and others, actually engaged in a series of experiments, which, on afterwards looking into the packet, they found to correspond exactly with those of Drs. Buchanan and Collyer. Dr

* This should read, “at the Museum in New York, by the Rev. La Roy Sunderland, and in Louisville, by Dr. Buchanan and others.” I having witnessed the experiments by Mr. Sunderland, as stated in the next paragraph, and having also seen a letter from Dr. Elliotson, apologizing for the error I have corrected, which “occurred (as he states) in the hurry of business.”

Elliotson then read from the *Hampshire Telegraph* a long account of experiments by Mr. Gardiner, from which we can only make room for the following:—

“I asked the patient referred to, (a young lady ignorant of Phrenology,) when in the trance, with what part of the brain she kept a secret? She replied, ‘On the side of my brain.’ Upon asking her to point out the spot, she placed *her* finger exactly on the organ of secretiveness in *my* head. I placed my finger on her organ of secretiveness, when she said, ‘Yes, just where I am touching *my* head.’ In the trance she fancies the two movements are identical. Having asked her where she felt *anger*, she placed her finger upon my organ of destructiveness. I inquired—where she felt *hunger*; her finger rested on my organ of alimentiveness. I interrogated her as to the *time*; she was wholly unable to tell me. The idea then struck me that I might possibly enable her to estimate the hour by exciting the organ of time. With this view, I rubbed the forehead gently at the required spot, exerting my volition to the utmost, of course; ‘Oh! that makes me feel so odd.’ I asked in what way. She replied, ‘It makes me know what time it is.’ She then told me the time with almost perfect accuracy. She would afterwards always estimate the lapse of time—intervals—with astonishing accuracy, upon my exciting the organ of time on her forehead. Her finger rubbed on my forehead, produced invariably the same results (this is true of all the organs). Upon my exciting her organ of tune in the same way, she said, ‘That makes me feel so very cheerful—it makes me like to hear some singing.’ I requested her to sing. She persisted in asserting her inability until I energetically excited *self-esteem*; when she said, ‘I’ll try,’ and she forthwith hummed an air. When her organ of colour was excited, she exclaimed with animation, ‘Oh, oh! I see green, yellow, purple, &c., such beautiful colours.’ If when she was unable to distinguish an object clearly, I excited individuality, she instantly perceived it distinctly. In the trance she is never aware of her *locality*, until the proper organ is excited. Upon one occasion I excited constructiveness, when she expressed a desire to make a cap-model, which she executed upon being supplied with materials. The organ *called* wit, or mirthfulness, being excited, she very soon began to laugh involuntarily, although I steadily maintained my gravity. I continued the operation, which produced an increase in her mirth until she fell into a continuous *fit* of laughter, exclaiming as well as she could, ‘I shall die of laughing.’ Upon exciting her organ of destructiveness, her whole aspect and tone gradually underwent the most marked change; the ‘milk of human kindness’ gradually turned to gall and venom; she pouted, frowned, threatened, stormed, clenched her fist, and finally became exasperated. Thinking I had gone far enough, I breathed on the organ with a view to reduce its activity and she very soon became calm, losing every symptom of anger. The most beautiful results were elicited by exciting the organ of imitation. She commenced mimicking and imitating, with extraordinary and ludicrous accuracy, several peculiarities of her acquaintances and friends, not omitting my friend Mr. Mansfield and myself in the act of magnetising. Suddenly, by the exercise of my whole energy, I paralysed the organ, and instantly her power of imitation vanished. I re-excited the organ, when she ~~im~~ immediately repeated her wonderful mimickry to our intense gratification.”

In a letter to the same paper by Dr. Engledue, confirming the statements of Mr. Gardiner, the writer says:—

“The discoverer of the true philosophy of man* was compelled to leave the land of his birth; and the philosopher of this country,† to whom we are indebted in a great measure for the promulgation of the remedial power of animal magnetism, was ejected from a college boasting of its liberal foundation, of its liberal professors, yet not possessing sufficient liberality to listen to the voice of truth.”

After having read these extracts, the President stated that Mr. Atkinson, a member of the Society, who was then in the room, had made similar experiments with the like success, of which he would read an account at the next meeting. His statements were confirmed by two other members then also present, Mr. Kirby and Mr. Nodin.

After a few words from those gentlemen in corroboration, and from Mr. Logan and other members, expressive of their curiosity, and of their conviction that the subject deserved attention and investigation, the meeting adjourned.—*London Phalanx*

* Dr Gall

† Dr. Elliotson.

While the London Phrenological Society was recording these extraordinary discoveries in mesmerism, in January, 1842; we were advancing here, in this interesting field of knowledge, as will be seen by the following account of some phrenological experiments in Hartford, Conn., in January, 1842. "The subject was an interesting married lady, of high intellectual cultivation, most respectably connected, and of unimpeachable integrity."

"An eminent lawyer being introduced to her, she began with him the discussion of some legal question, astonishing us by the clearness of her conceptions, or keeping us in a roar of laughter by the lively sallies of her wit. During this conversation, some one behind her placed his hand near her head, without touching it. She instantly evinced embarrassment, forgot the subject of discussion, and could not go on until the hand was removed. The magnetizer then placing his hand upon her forehead, her recollection was restored and the conversation renewed. The magnetizer then touched the organ of veneration, when she abruptly terminated the discussion, assuming an attitude of devotion, and refused all farther communication with the physical world. Her devotions being ended, she was put in communication with a scientific gentleman, with whom she held a long and interesting conversation on the subject of Animal Magnetism; boldly controverting his arguments and giving her own view of this extraordinary science with great clearness of thought and beauty of expression. And here she seemed like an ethereal being—a being of another creation—and in the language of the eminent divine to whose church she belongs, "she appeared perfectly sublimated." After this she astonished all by determining with wonderful accuracy the phrenological character of various individuals present, and describing with most minute exactness, their several diseases, acute or chronic, incipient or confirmed. A gentleman present was requested to sing and play a German song for her. The first note struck brought her to the piano, when during the prelude she persisted in standing, but the instant he commenced the song, she sat down by him, and with a full, sweet voice, accompanied him in the very words he sung, although in her natural state she has no knowledge of that language. She then accompanied a French gentleman in one of the songs of his country, and afterward began again the German song, which the pianist had been requested to sing once more. During the performance of this, she was demagnetized, and, of course, discontinued her accompaniment. Being asked by the writer why she stopped, and if she would not still accompany the other voice, she replied that she knew neither the words nor the air."

These feats, in the somnient state, of understanding and speaking in unknown tongues, or in a language unknown to these persons in the natural state, have been frequently repeated in this city. They were, moreover, practised in the ancient Pagan Temples, and by the apostles of the christians. See acts of the apostles, chapter 2.

The higher orders of the priesthood continued to be initiated into the mysteries taught in the Temples, long after the christian era; and this was a matter of great importance, for it was necessary for them to get up shows and theatrical performances, on holidays, in imitation of the Pagans and of the lesser mysteries, to amuse their audiences, and these were continued, even in England, as late as the last part of the sixteenth century.

St. Cyril, Bishop of Alexandria, in A. D., 412, in his VIIIth book against Julian, gravely observes: "These mysteries are so profound and so exalted, that they can be comprehended by those only who are enlightened. I shall not therefore attempt to speak of what is most admirable in them, lest by discovering them to the uninitiated, I should offend against the injunction not to give what is holy to the impure, not to cast pearls before such as cannot estimate their worth."

Theodoret, Bishop of Cyzicus, in Syria, A. D., 420, in his dialogue, entitled, "The Immutable" introduces Orthodoxus, speaking thus—"Answer me, if you please, in mystical and obscure terms, for, perhaps, there are persons present who are not initiated in the mysteries."

THE CREDULITY OF UNBELIEF.

Extremes meet. The desperation of the coward merges into the valor of the hero; the careful miser assumes the condition of the improvident beggar; and the Quixotic philanthropist, as in the Niger expedition, lays the foundation of results which might satisfy the bitterest malignity. The proverb applies alike to the ultra-manifestation of each sentiment of the mind: and thus it is that among those who pride themselves upon incredulity we sometimes meet with the most child-like simplicity of unquestioning belief. At a meeting of the Royal Medical and Chirurgical Society, a paper was read describing a case of painless amputation of the thigh during a mesmeric trance. It was furnished by two gentlemen, Mr. W. Topham, a barrister of the Middle Temple, and Mr. W. Squire Ward, M. R. C. S., formerly House Surgeon to St. Bartholomew's Hospital, to the following effect. The patient, a laboring man, forty-two years of age, had suffered for nearly five years from a painful affection of the knee; when, on the 21st June last, he was admitted into the district hospital at Wellow, Notts. During three weeks preceding the 9th September, he had not slept more than two hours in seventy; and at this time the attempt to induce the mesmeric state was made by Mr. Topham. It was repeated successfully every day until the 24th, when sleep was produced in four minutes and a half. "In this sleep his arms were violently pinched, as well as the diseased leg itself, without his exhibiting any sensation; yet the limb was so sensitive in its natural state that he could not bear even the slightest covering to rest upon it." On the 1st October, it was resolved that amputation should be performed during the mesmeric trance. Throughout the operation, "the placid look of the patient's countenance never changed; his whole frame rested in perfect stillness; not a muscle or nerve was seen to twitch." Afterwards he gradually awoke; and upon collecting himself, he exclaimed, "I bless the Lord to find it's all over." He denied having felt the slightest pain; and two days afterwards the first dressing of the wound was applied under similar conditions.

The supposition that mesmeric manipulation can produce the state thus described is one of great improbability; but the unbelief of members of the society overleapt itself, and induced them almost unanimously to jump to a conclusion which unfortunately requires for its unhesitating reception almost a larger amount of credulity than would be necessary for the phenomenon of which it is presented as the solution. The opinion thus readily adopted was simply that the patient had experienced all the pain usually attendant upon a capital operation, but that he had thought fit to *feign* insensibility; and, with this the subject was dismissed. Now, that two gentlemen, of, we presume, professional respectability, should out of mere wantonness plan a short-lived hoax, which must, if discovered, lead to their expulsion from society, is of itself no slight improbability; but that a timid patient, worn down with pain, and doomed to a dreadful operation, upon which his existence depended, should originate or lend himself to the motiveless joke, and perform his part to admiration, is an assumption of a still more astounding kind. Under any view, the case is surrounded by improbabilities, and inquiry, to whatever it might lead, could not fail to be instructive. If the patient be an impostor, he can hardly have arrived at the age of forty-two without having already, by the development of his genius, acquired in his own neighborhood a pretty distinct reputation: if, on the other hand, he has hitherto maintained a character for integrity, we do not see that the fact of his being an agricultural laborer entitles any society to brand him as an impostor, for making a statement which if it proceeded from one of their own station would be received at all events with respect, and which, as it relates to personal consciousness, they are unable to disprove. The case is calculated to interest every humane person. We fear that it may turn out a delusion; but at present those who have attacked it have merely substituted one improbability for another. The most direct evidence of which it is susceptible has been produced; and this can now only be strengthened or weakened by the testimony relating to the character of the principal witness. It is possible that Messrs. Topham and Ward were prepared to furnish some information on the point; if not, it was easily procured from other sources. But this, in the eagerness of incredulity, was lost sight of; and the members appear to have departed thoroughly satisfied, that although it is impossible to swallow a dromedary, a camel may be taken whole with very little inconvenience.—*London Spectator*, 1842.*

* Weak and bigoted men always gratify their vanity in opposing the introduction of additions to our knowledge, which not being taught in the schools in which they were educated are, consequently, above their comprehension. The fury with which such self-sufficient philosophers opposed the introduction of the theory of the Copernican system of astronomy is equalled only by that with which they now oppose the introduction of the theory of the magnetism of the human system. "Do we not see the sun rise in the east,—move through the heavens and set in the west? and must we now believe, against the plain evidence of our own senses, that the earth moves around the sun! and does not, the Bible say that the sun rises in the east, and sets in the west? What sacrilege! Bring the faggots, and we'll consign these new philosophers to the flames!" exclaims! the bigots, and Copernicus barely escaped those flames, by refusing to allow his work to appear until the day of his death!

IMPORTANT FACTS IN MESMERISM.

DR. DANIEL GILBERT,

Boston, Feb. 15th. 1843.

Dear Sir :—Engaged as you are, in the laudable enterprise of establishing a comparatively new but useful science, (Mesmerism,) every fact within your reach must be useful to you. For on facts, well established facts, must rest this as well as every other science. Below I give you one which came under my own observation, in the circumstances of which I was a party.

On Monday evening last, a young lady whom I had mesmerised ten or a dozen times for disease and had cured, some three months since, was walking in or near Belknap street and fell and broke the bones of her left arm, between the elbow and wrist. She was brought to her place of residence in Summer street, suffering, as might be expected, excruciating pain from the fractured limb. At the moment of her arrival, I was engaged in mesmerising a lady, a member of another family in the same house. I was desired as soon as possible to come to the lady who had broken her arm, which I very soon did, and proceeded to put her into the mesmeric sleep, which being done I endeavored to paralyze the arm, but having been engaged in mesmerising for the last two hours previous to this. I found my own force insufficient to effect this to my own satisfaction. I wished to paralyze the arm sufficiently to allow the operation of setting the broken bones to be done, without suffering on her part. I therefore desired a gentleman, Mr. Coburn, to assist me—requesting him to concentrate his force on the arm alone. This he did with marked effect. When satisfied that sensation in the arm was extinct, Dr. Hewett, who was called to set the broken arm, commenced operations.

I stood directly in front of the young lady and watched very closely the expression of her face, as did others present, and from beginning to end I did not discover the least manifestation of suffering, and while the most painful part of the operation was being performed, that of grinding the bones into their proper place, she continued to chat and joke with me until I desired her to desist, that I might better keep my mind concentrated on her arm. After the operation was performed and the arm dressed, it was again mesmerised, and I awoke her. I asked her if she had suffered any pain in the operation? She answered, none at all. Do you suffer any pain now? I asked. Not the least, was her answer. The arm has since the time of the operation been kept mesmerised—and she suffers no pain at all, while the process of healing is going on as rapid or more so, than in the normal state.

I give you these facts just as they occurred—they do not rest on my testimony alone. There were present on the occasion, Dr. Hewett, and a young gentleman who assisted him: Mr. Coburn, who assisted me and some five or six ladies, whom, if I have misrepresented any thing will correct me, or, if I have stated the truth, will corroborate the same. You are at liberty to use this communication in any way you choose to further the cause of truth.

Respectfully, you ob't servant,

SILAS ALLEN, 293 Washington street, Boston

DR. GILBERT.

Boston, Feb. 16th. 1843.

DEAR SIR. I wish to state some facts to you in regard to the truth of the science of Mesmerism which have come under my personal observation, which are the following:

I have a child which is now fifteen months old; this child ever since it was two months old has been subject to fits, and some of the time had as many as twenty in the course of twenty-four hours. There has not been but a few days in succession for twelve months but what the child had more or less fits each day, and I had about given up the idea that the child could ever be cured. I attended some of your Lectures on Mesmerism, although a skeptic at the time, I become convinced of the truth of the science. About a month ago I concluded to try myself, and see if I could mesmerise the child—I set myself about it and in two hours I had the child in a mesmeric state. I kept her in it for four hours; the next day she had two fits although much lighter than usual. I then mesmerised her again, in a very few minutes, and have followed it ever since two or three times a week, and the child has not had a fit since the second time I mesmerised her. Before I mesmerised her she was very weak and could not hold up her head. She did not weigh any more when she was fourteen months old than she did when she was two months old; since she was mesmerised she has grown very fleshy, and consequently gained strength very fast and can now hold up her head perfectly erect and looks like a plump healthy child. These, sir, are facts which I know to be true and you are at liberty to use them as you see fit. I think the truth of Mesmerism ought to be more generally known than it is.

Yours respectfully,

B. M'FARLAND, Garland street, Boston.

MAGNETISING MEDICINE, TRIUMPH OF SCIENCE.

The following article is extracted from a London publication entitled "The Popular Record of Modern Science." The book from which the extracts are taken is written by Professor Gregory, of Edinburgh, a gentleman held in high estimation for his scientific acquirements, and a son of the celebrated Dr. Gregory.

RESEARCHES ON MAGNETISM.

A contribution to science of far more than ordinary interest, has this week been furnished by Professor Gregory, of the university of Edinburgh, in a comprehensive statement of the researches of Baron Von Reichenbach on "Magnetism and certain allied subjects."* It appears that, while travelling on the continent last summer. Dr. Gregory's attention was directed to a detail of Baron Von Reichenbach's experiments, just published in the "Annalen der Chemie und Pharmacie," a periodical of the highest rank, conducted by Baron Liebig and Professor Wöhler.—The conclusions to be derived from these experiments were of the most startling character; but Dr. Gregory being aware of Reichenbach's character for minute accuracy and untiring perseverance, and of his reputation among chemists, in consequence of his laborious and successful researches on the tar of wood and of coal, which made us acquainted with creosote and many other new compounds, could not for one moment hesitate to receive the facts on which they rested. He felt anxious, therefore, on his return to Scotland in October last, that these experiments should be made known, and while preparing a translation of Reichenbach's statements, he took the opportunity of describing, in two lectures to a numerous audience, a considerable part of the results obtained. The fame of these lectures spread to London, and coming as it did at a time when discoveries by Faraday and Hunt had already excited the public mind upon the subject, the greatest interest was felt for further information. This information is now supplied, and it is of a character to awaken the liveliest gratification, as opening up a new and inexhaustible field for philosophical inquiry.

Baron Von Reichenbach's experiments originated in his having the opportunity of studying a patient, Madlle. Nowotny, aged 25, subject for eight years to increasing headaches, and latterly affected with cataleptic fits, accompanied with spasms. She possessed a remarkable acuteness of the senses, could not endure the daylight, and in a dark night perceived her room as well lighted as it appeared to others in the twilight, so that she could even distinguish colors. She was also very sensitive in various ways to the influence of the magnet. Struck with these things, and remembering that the aurora borealis appears to be a phenomenon connected with terrestrial magnetism, or electro-magnetism, it occurred to him that possibly a patient of such acuteness of vision might see some luminous phenomenon about the magnet. Dr. Von Eisenstein (the physician in attendance?) afforded every facility, and experiments were accordingly commenced.

"The first trial was made by the patient's father. In profound darkness, a horse-shoe magnet of nine elements, capable of carrying eighty pounds, was presented to the patient, the armature being removed; she saw a distinct and continued luminous appearance, which uniformly disappeared when the armature was applied.

"The second experiment was made as follows, on her recovery from a cataleptic attack, when the excitability of her senses was greatest. The room being artificially darkened, and the candles extinguished before the fit was ended, the magnet was placed on a table, ten feet from the patient, with the poles upwards, and the armature removed. None of the bystanders could see anything whatever, but the patient saw two luminous objects, one at each pole, which disappeared on joining the poles, and re-appeared on removing the armature. At the moment of breaking contact, the light was somewhat stronger. The appearance was the same at both poles, without any apparent tendency to unite. Next to the metal she described a luminous vapor, surrounded by rays, which rays were in constant shooting motion, lengthening and shortening themselves incessantly, and presenting, as she said, a singularly beautiful appearance. There was no resemblance to an ordinary fire; the

* Abstract of "Researches on Magnetism and on certain allied subjects," including a supposed new imponderable. By Baron Von Reichenbach. Translated and abridged from the German, by William Gregory, M. D., F. R. S. E., M. R. I. A., Professor of Chemistry. Edinburgh. 1846.

color of the light was nearly pure white, sometimes mixed with iridescent colors, the whole more like the light of the sun than that of a fire. The light was dense and brighter towards the middle of the edges of the ends of the magnet, than towards the corners, where the rays formed bundles, longer than the rest. I showed the patient a small electric spark; this, she said, was more blue, and left on the eye a painful and lasting sensation, like that caused by looking at the sun, when the image of the sun is afterwards seen on every object."

These experiments were repeated, and sometimes with a weaker magnet, nothing being said to the patient, who then saw only two luminous threads; the first appearances, however, always returning when the original magnet was substituted. As she regained strength, her impressibility diminished. After some time she saw nothing more than a kind of flash when the armature was removed, and eventually her recovery put an end to further experiments.

Dr. Lippich, clinical professor, now obtained for the Baron the means of experimenting with Madlle. Sturmman, a patient aged 19, suffering from consumption, and subject to the lower stages of somnambulism, with attacks of spasms and catalepsy, and she proved still more sensitive than Madlle. Nowotny.

"When the magnet (capable of supporting eighty pounds) was placed six paces from the feet of the patient (then in bed), in the darkened ward and the armature removed; the patient, then quite conscious, gave no answer, having instantly fallen into a state of spasm and unconsciousness. After an interval, she came to herself, and declared that the moment when the armature was withdrawn, she had seen fire rise from the magnet, which fire was the height of a small hand, white, but mixed with red and blue. She wished to examine it more closely, but the action of the magnet (the circuit being then not closed) instantly deprived her of consciousness. On account of her health, the experiment was not repeated."

A lad, subject to frequent convulsions, was the person next experimented upon, and with somewhat similar results. The next was Malle. Mair, aged 25, suffering from paralysis of the lower extremities, with occasional spasms, but exhibiting no other derangement of the nervous functions. As often as the armature was removed from a large magnet in the dark, she instantly saw the luminous appearance above the poles, about a hand's breadth in height.—Her sensitiveness increased when she was affected with spasms, and she then not only saw the light at the poles much larger than before, but she also perceived currents of light proceeding from the whole external surface of the magnet, weaker than at the poles, but leaving in her eyes a dazzling impression which did not for a long time disappear. This was the fourth confirmation of the existence of the magnetic light. The sensibility of the next patient was still more remarkable and distinct.

"This was Madlle. Barbara Reichel, aged twenty-nine, of stout build. At the age of seven, she had fallen out of a window two stories high, and since that time she had suffered nervous attacks, passing partly into lunacy, partly into somnambulism, and speaking in her sleep. Her disease was intermitting, often with very long intervals of health. At this time she had just passed through severe spasmodic attacks, and retained the entire sensitiveness of her vision, the acuteness of which was singularly exalted during her attacks. She was at the same time in full vigor, perfectly conscious, looked well externally, and went alone through the crowded streets of Vienna to visit her relations in their houses. The author invited her to his house, and she came as often as he wished it, so that he was enabled to employ her extraordinary sensitiveness to the magnetic influence, in researches with such apparatus as could not conveniently be brought into other houses.

"This person, although strong and healthy, saw the magnetic light as strong as any sick individual; she could move about freely, and was very intelligent, and in addition to these rare advantages, although highly sensitive, she could bear the approach of magnets, and experimenting with them, far better than sensitive persons generally do.

"This patient saw the magnetic light, not only in the dark, but also in such a twilight as permitted the author to distinguish objects, and to arrange and alter the experiments. The more intense the darkness, the brighter and larger she saw the flaming emanations, the more sharp and defined was their outline, and the more distinct the play of colors.

"When the magnet was laid before her in the dark, she saw it giving out light, not only when open, but also when the poles were joined by the armatures; but the

luminous appearance was different in the two cases. With the closed magnets, there were no points where the light appeared concentrated, as was the case when the magnet was open; but all the edges, joinings, and corners of the magnet gave out short flame-like lights, uniform in size, and in a constant undulatory motion. In the case of the magnet of nine elements, capable of carrying eighty pounds, these were about as long as the thickness of a little finger.

"When the armature was removed, it presented a most beautiful appearance. Each arm of the magnet was about eight and a half inches long, and the light rose almost to an equal height above the magnet, being rather broader than the bar. At each depression, where two plates of the magnet are laid together, there appeared smaller flames ending in points like sparks, on the edges and corners. These small flames appear blue; the chief light was white below, yellow higher up, then red, and green at top. It was not motionless, but flickered, undulated, or contracted by starts, continually, with an appearance as of rays shooting forth. But here, as in the case of Madlle. Nowotny, there was no appearance of mutual attraction, or mutual tendency towards each other of the flames, or from one pole to the other; and, as in that case, both poles presented the same appearance.

"Experiments performed on a sixth patient, Madlle. Maria Atzmansdörfer, aged twenty, who had headaches and spasms, and walked in her sleep, led to results confirmatory of the preceding. The light dazzled her eyes by its brilliancy.

"From the above facts it appears, that the foregoing six sensitive individuals, each according to the degree of sensitiveness or to the diseased state of the body, saw, more or less vividly, a luminous appearance, like a moving flame, at the poles of powerful magnets. These individuals were highly sensitive, although of unequal sensitiveness; and, although unacquainted with each other, and with each other's observations, their accounts agree in all essential points, and were, in each case, uniformly consistent, not only with themselves, but with the known laws of electricity and magnetism. The author, having no reason to doubt the perfect honesty of those persons, and feeling, at all events, confident of his own caution, accuracy and *bona fides*, has no hesitation in admitting the reality of the phenomenon, although invisible to ordinary men; and he considers the fact of the existence of such luminous appearances at the poles of powerful magnets as fully established as the researches of one man can establish a fact. He confidently anticipates confirmation from other observers.*

But in order to prove that the impressions upon these persons were the result of actual light, Baron Von Reichenbach instituted the following experiment:—

"A very sensitive Daguerreotype plate, being prepared, was placed opposite to a magnet, the armature of which was removed, in a closed box, surrounded with thick bed-clothes so that no ordinary light could enter. After sixty-four hours' exposure, the plate, when held over mercurial vapor, was found fully affected, as by light, on the whole surface. In a parallel experiment, made without a magnet, the plate was found entirely unaffected. This proves that, unless other imponderables, such as magnetism, act on the prepared plates as light does, the emanation from the magnet is of the nature of light, however feeble and slow in its action on the Daguerreotype."

This beautiful and satisfactory experiment was followed by another equally remarkable. By means of a lens, the magnet was made to produce a focal image on the wall, and whenever the experimenter moved the lens, Madlle. Reichel was able to point to the situation of the light.

Thus much with regard to the luminous appearances. We now come to the mechanical force exerted by the magnet on the human frame. Dr. Patelin, of Lyons, and other observers, having formerly stated instances of the attraction of the human hand by a magnet, and of the power of some patients to distinguish water, along which a magnet had been drawn, resolved to institute experiments in this direction.

"The adhesion of a living hand to a magnet is a fact unknown in physiology as in physics, and few have seen it: it, therefore, requires explanation. Madlle. N. being in catalepsy, insensible and motionless, but free from spasms, a horse-shoe magnet of twenty pounds power was brought near to her hand, when the hand at-

* Similar experiments were made in this city with Blind Mary, in the magnetic sleep, in February, 1842, by Mr. Sunderland, Fowler, and myself, with very similar results. We used the common U magnet, and the magnetised steel ring, one foot in diameter, and these experiments have been often repeated in this city.

It was during these experiments, that Mr. Sunderland magnetised Mary with this ring, when violent spasmodic action commenced and continued more than an hour, or until her old magnetiser was summoned to her relief.

tached itself so to the magnet, that whichever way the magnet was moved, the hand followed it as if it had been a bit of iron adhering to it. She remained insensible; but the attraction was so powerful, that when the magnet was removed, in the direction of the feet, further than the arm could reach, she, still insensible, raised herself in bed, and with the hand followed the magnet as far as she possibly could, so that it looked as if she had been seized by the hand, and that member dragged towards the feet. If the magnet was still further removed, she let it go unwillingly, but remained fixed in her actual position. This was daily seen by the author between six and eight P. M., when her attacks came on, in the presence of eight or ten persons, medical and scientific men.

"At other periods of the day, when she was quite conscious, the phenomena were the same. She described the sensation as an irresistible attraction, which she felt compelled, against her will, to obey. The sensation was agreeable, accompanied with a gentle cooling aura, streaming or flowing down from the magnet to the hand, which felt as if tied and drawn with a thousand fine threads to the magnet. She was not acquainted with any similar sensation in ordinary life; it was indescribable, and included an infinitely refreshing and pleasurable sensation when the magnet was not too strong."

Similar results were obtained with Mademoiselle Reichel and Madlle. Sturmann, and the statement of the various modes in which the veracity of the patients and the accuracy of the experiments were tested, is such as to inspire the most unreserved confidence in the experimenter. Mr. Baumgartner, the distinguished natural philosopher, was one of those who, amongst others, tested in a very ingenious way the above phenomena.

With regard to magnetised water, Baron Von Reichenbach, although strongly prejudiced against this "mesmeric idea," was compelled to admit that a palpable effect was produced.

"He saw daily that his patient could easily distinguish a glass of water, along which a magnet, unknown to her, had been drawn, from any others; and this without failure or hesitation. He found it impossible to oppose a fact like this by arguments; but when he saw the same result in many other patients, he ceased to struggle against that which, whether he understood it or not, was obviously a fact. He then perceived that it was more rational to admit the fact, and to wait with patience for the explanation."

The experimenter then determined to see, whether bodies besides water could be magnetized, so as to produce similar effects. He passed the magnet not only over all sorts of minerals and drugs, but over indiscriminate objects, and they all affected the patient more or less powerfully. But although all were equally magnetised, the results were different, some substances producing a strong, and others only a slight impression. It was therefore clear, that the different results must have been caused by an inherent difference of power in the various kinds of matter, and he resolved to test if this difference would manifest itself, when the substances were applied in their natural condition. To his astonishment they still acted on the patient, and with a power often little inferior to that which they had when magnetised.

Amongst the various substances tried (of which a well-arranged list is given), distinct solitary crystals were found to act in the strongest manner.

"In trying the effect of drawing the point of rock crystal, 7 inches long and $1\frac{1}{4}$ thick, from the wrist to the points of the fingers, and back, as in magnetizing, the author found that the sensation experienced by the patient was the same as with a magnetic needle or bar, nearly five inches long, one sixth inch broad, and one-thirtieth inch thick, weighing nearly 180 grains, and supporting about $\frac{1}{4}$ oz. The patient felt an agreeable cool aura in both cases, when the crystal or magnet was drawn from the wrist to the point of the middle finger; if drawn in the opposite direction the sensation was disagreeable and appeared warm. A crystal, thrice the size of the first, produced, when drawn downwards, the same effect as a magnet, supporting two pounds of iron; and when drawn the opposite way, a spasmodic condition of the whole arm, lasting several minutes, and so violent that the experiment could not well be repeated."

It was found that this peculiar force residing in crystals was analogous to electricity and magnetism, inasmuch as it was capable of acting through opaque bodies, and admitted also of being transferred to other substances. A large rock crystal, placed so that its point rested on a glass of water, produced water as strongly

magnetised as a horse-shoe magnet. It was further ascertained that the power thus transferred, was capable of being retained for a short time (in no case, however, longer than for ten minutes).

In Madlle. Nowotny, the hand was attracted by a large crystal, exactly as by a magnet of middling size. Crystals also gave forth the same luminous appearance as the magnet, only more singularly beautiful in color and form.

Still proceeding steadily in his researches, and calling to mind the many effects analogous to those of the magnet alleged to have been produced on sick persons by the human hand, Reichenbach, while he avoided all study of the literature of animal magnetism, in order to retain an unfettered judgment, resolved to ascertain "whether animal magnetism, like the crystalline force, might not be subject to physical laws? As crystallisation seems to mark the transition from organic to inorganic nature, he ventured to hope, that by experiment he might discover a point of connection between animal magnetism and physics, or perhaps even obtain, for animal magnetism, that firm foundation in physics, which had so long been sought for in vain."

And here the philosophical caution of the practised observer is strikingly displayed. In order that his experiments might be free from every disturbing cause, he felt it essential, previously, to ascertain the part which terrestrial magnetism plays in relation to human sensations. If a magnet or crystal produces marked effects, it is certain that the magnetism of the earth must exert a powerful action, and, therefore, it became necessary for him to ascertain the conditions of this action, to enable him to estimate the degree in which the results of the new experiments might be modified by its influence. The inquiries instituted with this view, led to the discovery of a singular fact, namely, that persons sensitive to the magnetic influence (at least, in the northern hemisphere), find, when in a recumbent state, every other position except that from north to south highly disagreeable; that from west to east, being in particular almost intolerable.

"On examining the position of Madlle. Nowotny, she was found lying almost exactly on the magnetic meridian, her head towards the north. She had instinctively chosen this direction; and it had been necessary to take down a stove to allow her bed to be placed as she desired it to be. She was requested, as an experiment, to lie down with her head to the south. It took several days to persuade her to do so, and she only consented in consideration of the weight which the author attached to the experiment. At last, one morning, he found her in the desired position, which she had assumed very shortly before. She very soon began to complain of discomfort, she became restless, flushed, her pulse became more frequent and fuller, a rush of blood to the head increased the headache, and a sensation of nausea soon attacked the stomach. The bed with the patient was now turned, but was stopped half-way, when she lay in a magnetic parallel, with the head to the west. This position was far more disagreeable than the former, indeed, absolutely intolerable. This was at half past eleven, A. M. She felt as if she would soon faint, and begged to be removed out of this position. This was done; and as soon as she was restored to the original position, with the head to the north, all disagreeable sensations diminished, and in a few minutes were so completely gone, that she was again cheerful."

Further singular corroborations are quoted in confirmation of this view; and Reichenbach thinks it sufficient to account for many of the errors and contradictions which have occurred in animal magnetism from the time of Theophrastus and Mesmer to our own day. "For if the same disease were treated magnetically, in Vienna, in the position north to south; in Berlin, in that of east to west; and in Stuttgart, in that of south to north; totally different results would be obtained in the three cases, and no agreement in the experience of the different physicians could be obtained."

"Nay, if the same physician, at different times, or even at the same time in different places, were to treat the same disease with the same magnetic means, while accidentally the beds of his patients were placed in different positions, he must necessarily see quite different results, so as to be entirely puzzled with magnetism and with himself. He must conclude it to be full of caprice and change; and finding it impossible to foresee and regulate its action, reject magnetism altogether as an unmanageable instrument. Such has been, in fact, the sad history of magnetism. From the earliest times, often taken up, and as often cast aside, it now lies almost unemployed, and yet is so distinguished, so penetrating, nay, we

may say, so incomparable a means of relief in cases where man has hitherto been unable to afford any benefit. Nervous diseases are still the *scandala medicorum*. It may be confidently expected, that ere long an improvement will be effected. The all-powerful influence of terrestrial magnetism will be measured and calculated, and the whole subject of magnetism will now admit of being regularly studied in reference to medicine. Progress will be made; experimenters will mutually understand each other; and the world at length hope to derive some actual benefit from those extraordinary things which have so long excited expectation without satisfying it. Having thus established the existence of a powerful influence exerted by the earth's magnetism on the magnetic phenomena in sensitive persons, all subsequent magnetic experiments were made with the patients in the position from north to south, which is considered by the author as the normal position for the living body, sensitive or affected with nervous maladies."

The experiments then instituted resulted in convincing Reichenbach that a similar force to that which he had detected in the magnet, and other bodies, resides in the human hand.

The most singular experiment is that with a glass of water.

"If it be grasped from below by the fingers of one hand, and from above by those of the other, during a few minutes, it has now acquired to the sensitive, the taste, smell, and all other singular and surprising properties of the so-called magnetised water. 'Against this statement,' says the author, 'all those may cry out who have never investigated the matter, and to the number of whom I formerly belonged; but of the fact, all those who have submitted to the labor of investigation, and have seen the effects I allude to, can only speak with amazement.' This water, which is quite identical with that treated with the magnet or with the crystal, in all its essential properties, has, therefore, received from the fingers and hand an abundant charge of the peculiar force residing in them, and retains this charge for some time, and with some force. It was found that all substances whatever were capable of receiving this charge, which the sensitive patients invariably detected. The inevitable conclusion is, that the influence residing in the human hand may be collected in other bodies, in the same way, and the same extent, as the influence residing in crystals."

But in ascertaining thus much we have not arrived at all the sources of this force. Some of Reichenbach's most interesting and striking researches go to establish, in the most unquestionable manner, that it resides also in the rays of the sun, and the moon, and the stars; that it is developed likewise in chemical action (especially in the processes of digestion and respiration), and again by electricity. These are its ascertained and peculiar sources; but it seems, from the experiments subsequently detailed by Reichenbach, that there is scarcely an object in the collective material world through which it may not be manifested in relation to peculiar idiosyncrasies.

Towards the conclusion of his remarks, the author gave some very interesting statements of the relative development of the magnetic force in individuals, at specified periods of four and twenty hours, and he suggests many applications of these facts of great practical value in the preservation of health. He promises also, within two months, to publish the results of extended inquiries.

On the whole, it is scarcely too much to assert, that a more interesting series of observations in relation to physical science has rarely been presented to the world. Those who will take the trouble to enter into the statements, of which little more than an outline has here been presented, will meet suggestions sufficient to give direction to a whole life-time of thought and observation. The phenomena observed and narrated bear with almost equal force upon every branch of inquiry—crystallography, mineralogy, geology, botany, anatomy, physiology, medicine, astronomy; in short, the whole circle of the sciences. It opens up a field of inquiry to which every student of Nature must direct his steps, and to which all, no matter how varied their pursuits, may bring their labor with a certainty of reward.

In conclusion, it is proper to mention that one very gratifying circumstance, in connection with the publication of these researches, consists in their having drawn forth the admirable remarks of Professor Gregory, by which the publication of them is accompanied. It is also a matter of congratulation that, in a letter dated from Vienna the 7th of the present month, published in the appendix, and addressed by Baron Von Reichenbach to Professor Gregory, the following paragraph is to be found:

"Berzelius has expressed himself in the same way as you have done; and carries on with me a friendly and brisk correspondence on the subject of my researches, on which we may shortly expect a report from him, to be laid before the Swedish Academy of Sciences."

REMARKS BY THE AUTHOR.

An attentive perusal of the preceding articles will naturally induce the reader to revert, with an additional degree of curiosity at least, if not of confidence, to what has been said in the successive chapters, and various appended articles of this work, on the subject of Magnetism, as the motive power of the human system, and also the curative power of the author's peculiar remedies. Even the routine practitioner of the schools, hedged in, as he may be, by habitual prejudices, and by an equally habitual deference to stationary medical authorities, not a whit more advanced in science than himself, may be led to suspect the possibility of magnetizing other substances besides iron, to which his knowledge may hitherto have been limited, and he may, if not altogether invincible to the approaches of modern science, even exert his mental courage so far as to speculate upon the possible magnetization of substances adopted in the practice of medicine. We do not expect, of course, that he will permit his speculations to become so daring as to take even a glimpse at the idea that all medicines, of every kind, whether having their natural properties enhanced by artificial magnetism or not, operate, either for good or evil, by the magnetic forces alone, for this would be akin to the grand conclusion that all the forces of nature, in all substances whatever, are identical with those of magnetism. But when he reads the conclusion of the inquisitive, cautious, and philosophical Reichenbach, re-published and respected as it is by the learned and eminent Professor Gregory, of Edinburgh, that not only water, but "all sorts of minerals and drugs," were not only susceptible of being magnetized, but also capable of imparting to his patients the magnetism they had acquired; when he further reads, on the same authority, that Reichenbach found that all substances whatever were capable of receiving a magnetic charge from *the human hand*, and that sensitive patients "invariably detected" the magnetism *thus* imparted, he may be led to think that there are greater absurdities in the world than the doctrine of magnetized medicines, and that even "Sherwood's Magnetic Remedies," after astonishing and confounding the medical faculty of the United States for more than thirty years, may admit of an explanation in perfect consistency with the demonstrable principles of magnetism. It must be a rather disagreeable transition of feeling, we dare say, for the too confident and arrogant sneer of derision to subside and change into the involuntary assent of grave and respectful conviction; but thousands have been compelled to experience this queer sensation, and every day is rapidly increasing the number.

It is difficult for the author of this work to advert to the preceding notices of the recent work of Reichenbach, without exposing himself to the charge of egotism, while merely sustaining his just and honest pretensions to precedence in this field of magnetical inquiry. In a matter, however, which may hereafter affect the claims of his country to a just position in the history of the science of the present age, all considerations relative to himself, whether of honor or of reproach, are, with him, of inferior moment. On this account, therefore, he will cheerfully incur the risk of the imputation of personal vanity, by claiming that it was an American physician who first not only asserted and demonstrated the practicability of magnetising medi-

cines, but established, in the course of a long practice, their paramount, indeed *exclusive efficacy*, in an extensive range and heretofore supposed wide diversity of human maladies, for which science had previously discovered no appropriate nor reliable cure. He fearlessly asserted that his remedies were *magnetic*, not upon the general principle that all remedies act magnetically, but upon particular and strictly chemical principles, at a period when he well knew that his supercilious brethren in the profession would ridicule the idea, and even before magnetism was distinctly recognized as a chemical agent at all. He thus, for the sake of holding forth a humane and guiding light of truth in advance of the age, and when his country, young even in national existence, had but comparatively few pretensions to the honor of original discoveries in science, voluntarily and deliberately incurred the envious hostility of a profession, jealous and implacable to a proverb, towards any of its members who shall dare to step beyond the hard, conventional limits, prescribed by previous authorities. He not only adopted magnetic medicines, but he magnetised them himself, in a chemical process necessarily and unavoidably too elaborate to be entrusted to the unprincipled recklessness of quacks on the one hand, or to the illiterate mass of the profession (in this respect but little higher than quacks) on the other; and thus had to encounter another and more plausible source of reproach, sustained only by sound convictions of prudential necessity. He has truly informed many members of the profession concerning the composition of his medicines, and has concealed from none, that their basis is a per-chloride of gold, exalted, by a process of magnetic chemistry, above any other chloride that can be produced either in this country or in Europe; and he has frankly imparted even this process, so far as it can be made without actual observation and explanation of every detail in the laboratory itself; and it has been as frankly conceded by all who are capable of forming a sound judgment upon the subject, that it could not with safety be entrusted in any written formulæ, either to the profession in general, or even to the best pharmaceutical chemists, ignorant of the peculiarly critical operations upon which a valid result depends. To do so, would not only be to risk, but to inevitably ensure, in a great majority of cases, the manufacture of a spurious production (as stated in page 163), and thus eventually consign to neglect and disrepute a remedy now, and, we trust, hereafter, a rescue to thousands from hopeless and fatal disease.

In the author's Quarterly Medical Journal, the "New York Dissector," he has advanced and defended the opinion that the great secret of Homœopathy, or of the extraordinary efficacy of infinitesimal quantities of medicinal substances, consists in their being actually magnetised by the triturating and other attenuating processes by which they are prepared. In other words, that the homœopathic medicines are magnetic, and that this is the sole explanation of effects at once undeniable and hitherto ridiculed, only because they appeared inexplicable. In his little work, "A Manual for Magnetising with the Rotary and Vibratory Magnetic Machines," the author has given Hahnemann's directions for magnetising medicines, by *trituration* and shaking. On page 166 of the work now in the hand of the reader, he has given extracts from Hahnemann on the subject of certain preparations of gold, as possessing "great remedial virtues, which cannot be replaced." This explanation of homœopathy was received with little favor at first, by some of its professors in this country, although fully and decisively sustained by Hahnemann's own language as quoted, notwithstanding his somewhat mystical dialect. Many of the objectors, however, upon more mature reflection, have assented to the force of the evidence adduced, and we think that the experiments of Reichenbach will now leave but little doubt upon the matter, in the minds of any who carefully investigate it.

On the subject, too, of the magnetic organization of the human system, first advanced by the author of this work, and for some time regarded as a mere imaginative vision of real or pretended clairvoyants, Reichenbach will be found to have elicited strongly confirmatory evidence and elucidation, although as yet his experiments have left this exceedingly curious and important branch of science in a cruder condition than he might have found it in this and other works long since published by the author in this country. Thus he appears to have supposed that the major magnetic axis of the human body is across it, and that the principal poles are in the hands at the ends of the fingers; whereas the author has clearly determined, by experiments equally legitimate, and much longer repeated, that the major axis is the longitudinal one, and the principal poles are in the brain, the solar plexus, and the genitals; those in the fingers, although as luminous and emittive as he describes them, being merely among the great number of minor or secondary poles. The author, nevertheless, cannot but congratulate himself and his readers upon this substantially conclusive corroboration or a discovery which, when first advanced, was deemed, even by many of his friends, as too bold and startling to be prudently offered to the public. Scientific caution, however, has been, and may be carried to the excess of frivolous fastidiousness and timidity; and moral courage in discovery, when properly sustained by evidence satisfactory to all reasonable minds, is a quality much more useful to the cause of truth and the advancement of science.

MAGNETIZED RINGS.

These rings should be made of steel wire, plated with gold, silver, tin, copper, or brass. When finished, they should be magnetized, one at a time, by placing a ring flat on one of the poles of a strong magnet, and then pressing on, and at the same time drawing it entirely off of the magnet with a quick motion. The ring will then have two poles, which will affect the compass or variation-needle; one of which should be worn on a finger of the right, and another of the left hand.

Gold rings made in this manner have a real value, as their influence on children and adults affected with *tubercula*, and at the same time very susceptible to magnetic or mesmeric influence, is very salutary, as shown by a trial of their effects in a great number and variety of cases during the last three years, and they will last a life-time. They have, however, little or no effect upon those who are insusceptible to these influences.

GALVANIC RINGS.

A knowledge of the remedial effects of magnetized rings, in persons who are very susceptible to magnetic or mesmeric influence, has excited the cupidity of adventurers, who are inundating the country with "Galvanic Rings"—so-called, under the patronage of the professors of medical colleges.

These rings are made of zinc and copper, and zinc and copper gilded, plated or silvered. Such rings cannot, however, be galvanized or magnetized so as to retain or maintain polarity; and are, consequently, of no value as remedial agents. They serve, however, as a badge to distinguish the weak, ignorant, and credulous, from the rest of the community.

THE PROCESS OF MAGNETISING.

The following directions for magnetizing, are given by Deleuze, who practised the art more than forty years.

"When a sick person desires you to attempt to cure him by magnetism, and neither the family nor the physician make objection to it, if you feel the desire to second his wishes, and are resolved to continue the treatment so long as it shall be necessary, settle with him the hour of the sittings, make him promise to be exact, not to limit himself to an attempt of a few days, to conform himself to your advice in relation to regimen, and not to speak of the undertaking except to persons who ought naturally to be informed of it.

"When you are once agreed, and determined to treat the thing seriously, remove from the patient all persons who would be troublesome; do not keep near you any except necessary witnesses, (one only if it can be so,) and request of them not to occupy themselves at all with the processes you employ, nor with the effects that follow, but to unite with you in the intention of doing good to the patient. Arrange things so as not to be too cold or too warm, so that nothing shall interfere with the freedom of your movements, and take precautions to prevent all interruption during the sitting.

"Cause your patient to sit down in the easiest position possible, and place yourself before him, on a seat a little more elevated, so that his knees may be between yours, and your feet by the side of his.—Demand of him, in the first place, that he give himself up entirely, that he think of nothing, that he do not trouble himself by examining the effects which he experiences, that he banish all fear, and indulge hope, and that he be not disquieted or discouraged if the action of magnetism produces in him temporary pains.

"After you have brought yourself to a state of self-collectedness, take his thumbs between your two fingers, so that the inside of your thumbs may touch the inside of his. Remain in this situation five minutes, or until you perceive there is an equal degree of heat between your thumbs and his: that being done, you will withdraw your hands, removing them to the right and left, and waving them so that the interior surface be turned outwards, and raise them to his head; then place them upon his two shoulders, leaving them there about a minute; you will then draw them along the arm to the extremity of the fingers, touching lightly. You will repeat this *pass* five or six times, always turning your hands, and sweeping them off a little, before reascending; you will then place your hands upon the head, hold them there a moment, and bring them down before the face, at the distance of one or two inches, as far as the pit of the stomach; there you will let them remain about two minutes, passing the thumb along the pit of the stomach, and the other fingers down the sides. Then descend slowly along the body as far as the knees, or farther; and, if you can conveniently, as far as the ends of the feet. You may repeat the same processes during the greater part of the sitting. You may sometimes draw nearer to the patient, so as to place your hands behind his shoulders, descending slowly along the spine, thence to the hips, and along the thighs as far as the knees, or to the feet. After the first passes you may dispense with putting your hands upon the head, and make the succeeding passes along the arms, beginning at the shoulder, or along the body, commencing at the stomach.

"When you wish to put an end to the sitting, take care to draw towards the extremity of the hands, and towards the extremity of the feet, prolonging your passes beyond these extremities, and shaking your fingers each time. Finally, make several passes transversely before the face, and also before the breast, at the distance of three or four inches; these passes are made by presenting the two hands together, and briskly drawing them from each other; as if to carry off the superabundance of fluid with which the patient may be charged. You see that it is essential to magnetize, always descending from the head to the extremities, and never mounting from the extremities to the head. It is on this account that we turn the hands obliquely when they are raised again from the feet to the head. The descending passes are magnetic, that is, they are accompanied with the intention of magnetizing. The ascending movements are not. Many magnetizers shake their fingers slightly after each pass. This method, which is never injurious, is in certain cases advantageous, and for this reason it is good to get into the habit of doing it.

"When the magnetizer acts upon the patient, they are said to be in *communication* (rapport.) That is to say, we mean by the word *communication*, a peculiar and induced condition, which causes the magnetizer to exert an influence upon the patient, there being between them a communication of the vital principle.

"It is by the ends of the fingers, and especially by the thumbs, that the fluid escapes with the most activity. For this reason it is, we take the thumbs of the patient in the first place, and hold them whenever we are at rest.*

"The processes I have now indicated, are the most regular and advantageous for magnetising by the long pass, but it is far from being always proper, or even possible to employ them. When a man magnetizes a woman, even if it were his sister, it might not be proper to place himself before her in the manner described; and also when a patient is obliged to keep his bed, it would be impossible to make him sit, in order to sit in front of him.

"In the first case, you can place yourself by the side of the person whom you wish to magnetize. First, take the thumbs, and, the better to establish the communication, place one hand upon the stomach, and the other upon the back, then lower the two hands, opposite to each other, one down the back, and the other at a distance down the forepart of the body, one hand descending to the feet. You may magnetize the two arms, one after the other, with one hand only.

"In case the patient cannot raise himself, take your station near his bed in the most convenient manner; take his thumbs, make several passes along the arms, and, if he can support himself upright, several along the back; then, not to fatigue yourself, use only one hand, placing it upon the stomach, and making longitudinal passes, at first slightly touching through the clothes, then at a distance. You can hold one hand fixed upon the knees or upon the feet, while the other is in motion. Finish by passes along the legs, and by transversal passes before the head, the breast, and the stomach, to scatter the superabundant fluid. When the communication is established, one can magnetize very well by placing himself at the foot of the patient's bed, and in front of him; then directing at that distance both hands from the head to the feet, dashing them aside after each pass so as not to conduct the fluid to himself. I have produced somnambulism by this process, without establishing the communication by touching.

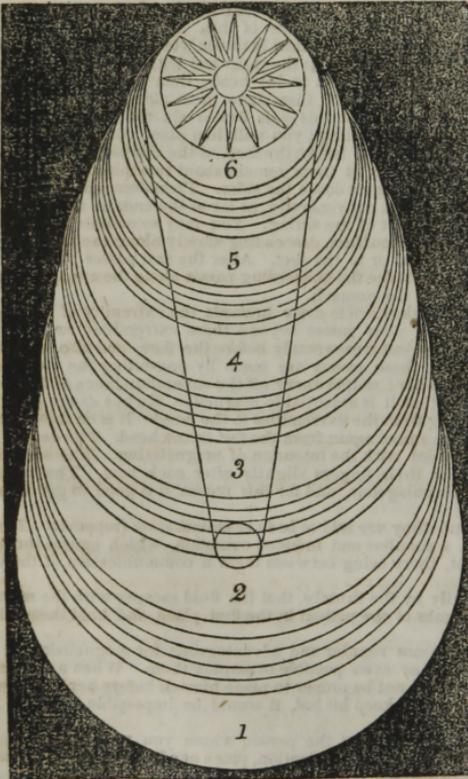
"This is what I have to say about magnetising by the long pass, with which it is always proper to commence, and to which a person may confine himself until he has a reason for employing other processes."

* There is a magnetic pole in each of these places,—the largest in the thumb: a fact unknown to Deleuze.

CHAPTER VI

MAGNETIC SLEEP.

FIGURE 32.



A much greater number of persons can be put into the magnetic or mesmeric sleep under the combined influence of the magnetic machine and the magnetiser, than by the common method, or that of the magnetiser alone. Many go into that state by the influence of the machine alone.

In the combined operation, we place the positive button in the right hand of the person to be magnetised, and take the negative button in our left hand, and then take with the other hand the left hand of the same person, under the most moderate power of the instrument.

The patient is then requested to look steadily at some small object as the armature of the instrument, as long as the eyes can be kept open, and then to close them and go to sleep, or into the mesmeric state.

This manner of magnetising, like every other, should be practised, under the most favorable circumstances, as regards time, place and seclusion, and should be repeated every day at the same hour, until the object is effected.

When persons or patients have passed into the mesmeric state, they should be treated in the most mild and respectful manner, and if they

show symptoms of restlessness, a few passes should be made from the head, along the arms to the feet, which will quiet them, and they may then be allowed to remain in that state a few minutes or one or more hours, according to the judgment of the magnetiser, when they may be aroused in a moment, by reversing the action of the machine, or by reversed passes, or passes with the back of the hands over the face at right angles with the median line.

Patients are sometimes clairvoyant the first time they are mesmerised, but not generally so; they will, however, tell the number of times it will be necessary to mesmerise them before they will become clairvoyant. They advance in *light* and knowledge by *degrees* in the mesmeric or somnient state. There are six of these degrees, and six sub-degrees or steps in each degree, thus making thirty-six; and the clearness and extent of their vision, as well as their intuitive knowledge, increases as they advance in the different degrees. There are, it appears, very few who advance higher than the third degree, or eighteen steps. A few raised as high as the fifth degree, but these are bounds it seems they cannot or do not pass with impunity.

These recognized degrees are described as circles of light in the form of a cone, with steps or degrees of less light in spiral circles, between the greater degrees of light in perfect circles—the spiral being continuous, and terminating in a disc of the most intense light in the top of the cone, as represented in the engraving. Fig. 32.

The light is represented as radiating from the disc at the top, to the bottom of the cone, and the intensity of the light is minimum in the first degree at the base, and increasing in each degree as they rise to the sixth, where it is at its maximum.

A reversed interior arrangement or inverted cone, is also described by clairvoyants, corresponding with that in the circumference, as seen by its outlines in the engraving—the great degrees of both being interspersed with rooms or apartments of light.

The first great degree of light forming the base of the cone first described, surrounds the base of the brain, while the sixth degree is mounted on its summit.

The light is very dim in the first degree, less so in the second, and as a medium in the third; in which degree clairvoyants see and describe very well under favorable circumstances, but are otherwise subject to great errors in their descriptions, as well as in the first and second degrees.

In raising clairvoyants to the higher degrees, magnetisers should proceed with great caution. They should first inquire about their knowledge of the degrees in the somnient state, and then of the degree they are in. If they are in one of the lower degrees, the magnetiser

may then inquire whether he can raise them to the next degree. If the answer is in the affirmative, he may proceed to raise them by the exercise of his will ; but if it is in the negative, the clairvoyants will, on inquiry, tell him how many times it will be necessary to magnetise them, before he can raise them to the next degree. We have great doubts of the propriety of any attempt to raise them higher than the fifth degree, even with the most perfect preparations for it : because in the present state of our knowledge they cannot be raised to the sixth degree without great danger, indeed, without the peril of their lives ; and there is no real necessity for it, as the light is intense enough in the fifth degree, and there are also sights enough that may be seen in that degree to satisfy the cravings of the most marvellous.*

The phenomena of the degrees in the *labyrinth* we have described, as seen in the somnient state, is one of the most extraordinary that was ever presented to the human mind ; yet it is a perfectly simple, and beautiful magnetic arrangement, resulting from the operation of magnetising, or of giving a new and systematic magnetic form to the brain—of adding an artificial to the natural organization, in which the organization of the great pole in the centre of the brain (2) is reflected upon its surface, and from thence into infinite space.

The poles of all the other organs are organized in a similar manner as seen in the somnient state ; that is, they are organized with circles at right angles with their radiation, like those seen on the summit of the *labyrinth*, and some clairvoyants see through those of the stomach. Besides the concurrent testimony of clairvoyants on the organization of magnetic poles, it is found on a comparison of our previous knowledge on this subject, that their descriptions agree exactly, as far as our

* Clairvoyants, however, sometimes go into that degree of their own accord to gratify their curiosity, and a case of that kind has come under our own observation. The clairvoyant soon began to complain of the intense light in that degree in which she said it was like looking at the sun, and that she did see the sun, when a deathly paleness ensued, with slow and laborious breathing. We now requested her to come down from that degree, but she protested that it was impossible for her to do so, for she should fall. We then told her that that we would help her down, and commenced making long passes, and after having made a few, we reversed the order, and we continued alternating the passes in this way a few minutes, and then with the reversed passes in conjunction with a strong effort of the will, awoke her. She did not, however, in awaking, return down the steps through the inside of the circles as usual, but came down the steps on the outside. These circles were now so much expanded as to extend five or six inches from her head, and so interrupted her sight for about twenty four hours in her waking state, as to make it necessary in raising her comb to her head or her victuals to her mouth, to raise them under or over the circles in order to conduct them to their place of destination.

On occasions like this the magnetiser should be as calm as possible, as he will have occasion to exercise all his firmness.

knowledge extended. We were well acquainted with the radiations, with the circles at right angles with them—with their light, and with their spiral circles and inverted cones; and could not, therefore, fail to recognize in these descriptions, a magnetic organization.

Those who are unaccustomed to magnetic phenomena, however, find great difficulty in reconciling with their preconceived notions, the possibility of persons being able to see, and thereby distinguish, objects through any other medium than that of external light, and by means of the ordinary functions of vision. The idea of *any* light, except that which comes from external objects, seems to be regarded as unphilosophical, if not assumptive of the supernatural, although an easy and palpable demonstration of the fact is, at all times, within the reach of the most sceptical and supercilious. Let the doubter and sneerer simply close his eyes, so as to exclude all external light, retiring, if he please, into a perfectly dark room where not a ray exists, and on pressing his fingers on his eye-balls, he will see, without that mechanism of the eye which is essential to external vision, several distinct and concentric rings of light, round a point of still greater brilliancy. And though he be afflicted with blindness towards external things, this power of internal vision will be in nowise impaired. The light thus seen is magnetic, being elicited from the two poles, of opposite denominations, which belong to the crystalline lens; and is doubtless of the same character as that which is affirmed by clairvoyants to exist in the brain, the heart, the cervical glands, the kidneys and other organs, and by which, in fact, they are enabled to trace the whole magnetic organization of the human system. With the intense luminosity of the magnetic forces when in atmospheric combustion, every one is familiar; and we have now furnished an example, at least equally familiar, in which this luminosity is as independent of atmospheric, as it is distinct from every other kind of light. In short, every one can see for himself precisely the same kind of light that is beheld by clairvoyants in the mesmeric state.

The internal organization of the pole in the centre of the brain, as disclosed in the somnient state, is, however, the subject of the greatest interest; for the interior of the inverted cone, described by clairvoyants, is the magnetic miniature *germ* of the form of the brain. The heart, lungs, stomach, and other organs, as well as the limbs, have magnetic miniature germs of their organizations, which are varied, according to the variations in the forms of the organs and limbs, as seen by clairvoyants. These organizations are also seen to be connected together by magnetic axes and interlacings, irrespective of the organization of the nervous system, and constitute a perfect magnetic, spiritual, or immaterial form, corresponding with that which is ma-

terial. They are purely spiritual forms, connected with, or inclosed in, those that are material, and according to the concurrent testimony of clairvoyants, these spiritual forms are raised, after death, in all the beauty of their earthly tenements.

The germs, with which the human system was formed and perpetuated, are, therefore, magnetic or immaterial forms, inclosed in those that are material; and according to the same concurrent testimony, the entire animal and vegetable kingdoms were formed, and perpetuated in the same manner. Hence we infer a corresponding cosmogony of the solar system, and of the stars in the heavens.

LIGHT AND IMAGES OF THE DEGREES.

In the first degree and first state of magnetic sleep, the light is a pale blue.*

In the second degree and second state, the light is a little stronger, and a little deeper blue.

In the third degree and third state, these sleepers are fully under magnetic influence, and the light a clear sky-blue. They see objects in a straight or direct line, through the magnetic medium in space, but not comprehensively, or inclosing various objects as in the natural state.

In the fourth degree and fourth state, the light is stronger, and extends farther than in the lower degrees. Persons with moral organs largely developed, are disposed to see immaterial or spiritual objects in this degree.

In the fifth degree and fifth state, the light is still more intense, and clairvoyants less inclined to view or take cognizance of natural, external or material objects, but disposed to remain in this exalted state.

In the sixth degree and sixth state, the *tendency* of going into it is instant death, and should be most cautiously avoided.

In the first *state* of magnetic sleep, persons retain more or less of their intellectual faculties, and are more or less susceptible to external influence.

In the second state the paralysis of the muscles, and the insensibility of the skin is complete—the natural sight lost, the hearing more or less impaired, and a muscular attraction established.

In the third state a strong sympathy is established between the mind of the subject and the magnetiser—the mind of the former being under the control of the latter.

In the fourth state the mind of the clairvoyant soars far above that of the magnetiser and becomes free and independent.

* They change from the natural to higher states, as they enter in and advance in the degrees

MAGNETIC LIGHT, AND MAGNETIC POLES.

In magnetizing with the vibratory magnetic machine, we become familiar with magnetic light—with its color, and intensity, &c. Its color is that of the sun, and its intensity increases from the smallest glimmering to the greatest brilliancy, with the *increase of the strength of the poles* in the magnet and piston, and consequently with the power of the instrument. This light does not emanate from a process of combustion requiring oxygen to support it, but is equally brilliant when enveloped in water, or in an exhausted receiver, and is the light which is seen by clairvoyants to issue with the greatest intensity from the poles of magnets, and the poles of the organs and muscles, &c. Clairvoyants see with the light which emanates from the great pole in the centre of the brain, and they see the internal parts of animals, and of the human body, lighted up with the light from the poles of the organs and muscles, &c.

The organs and muscles are thus seen in the most clear and distinct manner in their healthy state, but when they are diseased, the light becomes dim in proportion to the intensity of the disease, and in some extreme cases becomes extinct in an organ or limb, with the strength of their poles, according to the concurrent testimony of clairvoyants, and the fact that these organs and limbs are feeble, in proportion to the decrease of light, and are paralysed when it is extinct, is strongly confirmatory of this testimony.

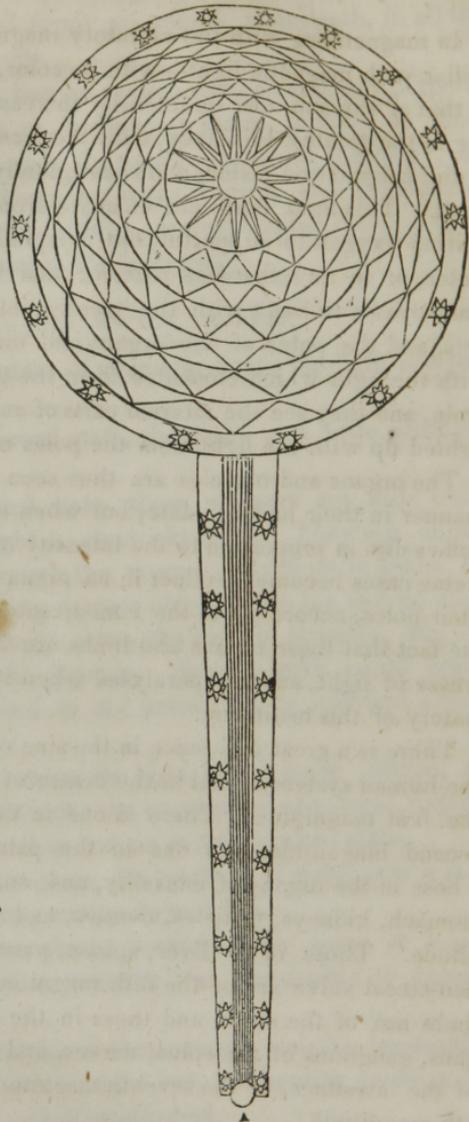
There is a great difference in the size of these poles. The largest in the human system is that in the centre of the brain, and is of course of the first magnitude. There is one in the hollow of each foot, of the second magnitude, and one in the palm of each hand, of the third. Those in the organs of causality, and amativeness—in the lungs, heart, stomach, kidneys, testicles, ovaries, and vagina, are of the fourth magnitude. Those in the liver, spleen, pancreas, solar plexus, uterus, and ileo-cæcal valve are of the fifth magnitude. Those in the joints of the limbs are of the sixth, and those in the eyes, in the phrenological organs, ganglions of the spinal nerves, and in the angles, or convolutions of the intestines, of the seventh magnitude, and those in the skin of the 8th magnitude.

These poles in the organs, joints, muscles and skin, &c., show radiations from a centre or *nidus*, like those from the poles of magnets, and are, like them, connected with magnetic axes and interlacings, and thus make a magnetic or spiritual form, like the human form, on which matter is laid in the construction of the human system. These poles are endowed with motion, power, light, sensation, inclination, and consciousness, as is seen and demonstrated in the clearest manner.

The following engraving is intended to present a view of the great pole in the centre of the brain, as seen by clairvoyants. It occupies the whole space between the circle of small poles of the phrenological organs.

FIG. 33.

It is very light, especially the nidus in the centre and summit, which has the same intensity as the sun, and is always in motion, excepting in natural sleep, when it is in a quiescent state. The form in a situation corresponding to that of the spinal marrow,^a is a continuation of the nidus, or nest of magnetic forms, and the small poles on each side, are those of the ganglions of the posterior spinal nerves in the intervertebral spaces, which gives them sensation. This great pole is surrounded with six great circles, and six small, intermediate circles of light, and the other large poles, from the first to the fourth magnitude, are surrounded with a certain number of similar circles of light, as those of the lungs, heart and stomach, &c.



CLAIRVOYANT POWERS.

A great difference in the clairvoyant powers of different persons in the magnetic state has often been noticed, and is the consequence of various causes. Among these is a difference in the organization of the brain—in the phrenological organs, and in the relative quantity of grey or cortical substance around these organs. Besides, some are in the lower or first, second, or third degrees, while others

have been raised to the fourth, or fifth degrees. Another cause of difference is that of a difference in their education; and another, that of a difference in the education, *minds*, and theories of their magnetisers, or those who conduct the examinations of the different subjects presented to them, and this last cause of difference may often produce the most discordant results.

The only manner of obviating these differences in the cases that are remediable, is to educate them, or at least to give them a general knowledge of the arts or sciences to which their attention or business, as clairvoyants, is mostly devoted, and this object is easily affected by teaching them in the magnetic state, as they remember when in it, and rarely forget what they once learn in that state.

Those devoted to the practice of medicine, should be taught anatomy, physiology, and magnetism, with the magnetic organization of the human system, and the two great divisions of diseases, or those of the serous and mucous surfaces, and their magnetic or duodynamic treatment, or with the magnetic machine and magnetised medicines. And this is a matter of great importance, as there is no longer any doubt that the effects of medicine, whatever they may be, is the consequence of the action of imponderable, or imperceptible agents condensed in them, upon the nervous, spiritual, or magnetic organization of the system.

Besides the common clairvoyants who literally see things as they appear to them in their natural state, and besides, have intuitions of the past and future, there are others who do not see literally, but have impressions more or less vivid, that things or objects appear, and are as they describe them. Jackson Davis is an example, or one of those who have impressions, instead of literal sight in the magnetic state, and we know other examples of the same kind in this city. Some few clairvoyants recollect in their natural state, very distinctly, many of the objects they see in the magnetic state, and some of the impressionists recollect, in the natural state, many of their impressions in the magnetic state, and on a full investigation of the subject, there appears to be no doubt but clairvoyants see literally, and the impressionists have impressions or intuitions common to both, without literal sight or clairvoyance.*

The present, past, and future knowledge daily displayed by a great many persons in the magnetic state, leaves no room to doubt but they have an intuitive knowledge in that state, which is more or less perfect, besides the knowledge they obtain from literal sight, or clairvoyance, and the evidences on this subject having been frequently described, and

* We recollect, distinctly, many objects we see in the magnetic state, and know that we see them literally as we do with our eyes in the natural waking state, and we have been in the habit of thus seeing them during the last ten years, and cannot possibly be mistaken.

often observed by a great number of the most intelligent persons in almost every community, it is deemed a useless task to enumerate them here. It would also be useless to enumerate the evidences of the great superiority of clairvoyants to mere impressionists, as it must be self-evident to every sane mind; besides the lucidity and accuracy of the former, and the illusions and phantasies often displayed by the latter are proverbial.

On an examination of the subject of these intuitions, or of immediate knowledge without the deductions of reason, they are plainly seen to be the natural emanations from the exalted organs of the magnetised brain, and not from supernatural agency, as suggested by the marvellous. They are not, in fact, confined to persons in the magnetic state, but are common to many persons in the natural waking state, numerous examples of which are familiar to persons of observation.

CLAIRVOYANT EXAMINATIONS OF DISEASES.

There is rarely anything presented to the mind of a physician which is so unintelligible as the reported examinations of diseases by clairvoyants when those examinations have been conducted by persons who have little or no knowledge of diseases, anatomy or physiology, and they are consequently unable to form an opinion of the good or bad effects that may be expected from the prescriptions of clairvoyants in such cases, yet it is the opinion of many well-informed persons that these prescriptions are generally more successful than those of the best physicians. When, however, these examinations are conducted by physicians, they are generally very satisfactory, and in a great variety of cases are very useful, and in many others indispensable to forming a true diagnosis as well as a correct prognosis of diseases. The prescriptions of clairvoyants under such circumstances are generally well understood, and their value duly appreciated. As an example, we may refer to the cases of deafness, the causes of which in any given case is almost always unknown, and would always remain so, without a clairvoyant or postmortem examination. The eustation, or auditory tube, through which the sound passes from the ear to the throat, may be obstructed by hardened wax, by tuberculations, or by false membranes, or the deafness may be the consequence of paralysis (more or less complete) of the auditory nerve. Now it is easy to be seen that the treatment, to be successful, must be different in each case, for the hardened wax must be removed, or melted with steam, the tuberculations must be reduced with the remedies for tubercula, the false membranes must be broken up with an instrument, and the paralysis must be removed by the remedies for mucosis or atrophia, including the action of the magnetic machine, and hence the great importance of clairvoyant examinations in these cases.

Although we can determine in an instant the character of the disease of an organ or limb by the magnetic symptoms, yet we cannot always tell how far the disease has advanced, whether it is curable, or too late to be cured without a clairvoyant examination, and this is often a matter of great importance. It is also often a matter of great importance to observe by clairvoyance the changes that occur in the appearance of a disease during the process of cure from changes of temperature, from colds, and from various other causes. Clairvoyance is also a matter of great importance to females—in diseases peculiar to their sex, and in enabling ladies to avoid the most revolting examinations with the most perfect safety, and with credit to themselves and their families. Besides the examination of patients when they are present, clairvoyants examine patients at great distances from them, and in fact in any part of the world, and generally with the same accuracy as if they were present. It is the magnetic forms, or *spirits* of these clairvoyants that travel over any part of the world, and are present with those patients when they examine them. We know that their spirits travel, and are present with the patients in these examinations, from the fact that they have the full exercise of all their senses while travelling to different places, and during the examinations of these patients. They see the country and towns they pass through, feel the changes in temperature and climate, hear any uncommon or strange sounds, as the blowing of horns, the noise of steamboats, or the roaring of the falls of Niagara, &c. ; notice uncommonly pleasant or disagreeable odors, visit places of amusement, and have a sense of fatigue, hunger, and thirst. Besides, if one of these patients have a paralysed limb, a corresponding limb of the clairvoyant becomes paralysed the same as if the patient was present and having hold of the hand of the clairvoyant. Such are the well ascertained facts, and such is the evidence on this subject, which is deemed perfectly conclusive, no matter how extraordinary it may appear to those who are not initiated into the mysteries of the magnetism of the human system.*

When clairvoyants are tired, unable or unwilling to travel to the places where patients reside, the magnetisers can direct the magnetic forms, or *spirits* of these patients to appear before them, when *they do so appear* with their diseases, and in the proper form and dress, or costume of these patients, where they are examined with the same accuracy they are under the other circumstances before described, and are then directed to return to their several places of abode, when they soon

* The magnetisers must always conduct the clairvoyants home before they demagnetise, or wake them, but if they should forget to do so, they must magnetise them again, and then conduct them home.

disappear. Such are the well-ascertained facts in these cases, and such is the power of the human will.*

We have been engaged in the examination of patients by clairvoyants about four years, and in the daily practice of it during the last two years, and have, during all this time, examined a great many hundred cases, and cannot possibly be mistaken in any of the facts above mentioned.

The great and universal accuracy of these examinations has uniformly elicited the most flattering commendations, as well from persons residing at great distances as from those of this city, and vicinity, and among these there are many who rank with those of the highest order of intellect. These results of these examinations, with the success of the practice founded upon them, has so increased our correspondence as to make it a matter of some importance to us in the saving of labor, to explain these mysteries in this work for the benefit of our correspondents, and to enable them to furnish us with the means for examining patients at great distances with great facility, or in the shortest time.

EXAMINATIONS AT GREAT DISTANCES.

When we wish to examine a patient residing at a great distance from us, we can put a person present who has been at the abode of such patient in communication with the clairvoyant, and direct that person to conduct the clairvoyant to the patient, or in the absence of such person, we can place a letter from the patient, or from a person in the family of the patient, in the hands of the clairvoyant, with directions to find the patient, when a light starts off in the form of the great pole in the centre of the brain with its train of small poles,† followed by the spirit of the clairvoyant, which sees a narrow strip of country, or of water, when passing over it, and in passing through the streets of towns and cities, often see the houses on either side of a street by its guiding light shining upon them. After having found and examined the patient, it returns home in the same manner, and enters into its place of abode. Such is the concurrent testimony of clairvoyants, and such are the extraordinary facts.

We are aware that it may be said that the constant presence of the spirit of the clairvoyant is necessary to maintain life, and as the clairvoyant does not die, the spirit does not travel in the manner described,

* The magnetiser must always be careful to direct the spirit of the patient to return to its place of abode, and see that it departs before he demagnetises or wakes the clairvoyant, but if he should forget to do so, he will soon learn his mistake, as the clairvoyant will probably be very much frightened, and may go into convulsions, and he should therefore magnetise the clairvoyant again as soon as possible.

† Fig. 33, p. 192.

because it is impossible for it to be in two places at the same time. It should, however, be remembered that the clairvoyant was magnetised (no matter how), and that to magnetise a body is to make a magnetic form or spirit in that body, as is easily demonstrated, and this spirit may and does maintain the body of the clairvoyant in a healthy state in the absence of its own spirit.

As the examinations of patients in the manner above described is a legitimate business, of great importance to the community, it should not be mixed up with and degraded with vain experiments that are foreign to it, and injurious to the sight of clairvoyants. They should not, therefore, be required to answer questions on the subject of such experiments, but should leave them for the solution of the clairvoyants of private parties.

In finding and examining patients with a letter, every facility should be afforded by the patient, or friend of the patient residing in the same house, where the letter should be written, as the spirit of the clairvoyant will always go directly to that house. The spine of the patient should be examined in the manner described in page 43 of this work, and the result stated in the letter, and besides, if there are any swellings of the joints, limbs, or any other part of the body, or any ulcerations, they should be mentioned, as they might be overlooked in the examination. If there is any pain or tenderness from pressure along the spine, we shall know that it is a case of tubercula, and if the number and situation of the painful or tender spots are stated as near as may be, we shall know if the spirit found the patient or some other person, and if some other person, we can direct the continuation of the search until the patient is found.

If on examination there is no tenderness found along the spine of the patient, it should be so stated, when we shall know it is a case of mucosis or mucous disease, but we should not know what organ was diseased, and it should consequently be mentioned in the letter.*

On having the information we have described, which is easily furnished, we can easily know by means of clairvoyance, how far the disease has advanced in each case, and whether they are curable or incurable, or as well as we could if we had the body of the person open before us. All the cases are curable in the first stage of the disease, and about ninety-five out of every hundred in the last stage, including tubercular consumption and white swellings of the joints and limbs, as we have demonstrated in the clearest manner, and we shall continue to undertake the cure of the curable cases presented to us for that purpose, and have the fullest confidence that with the means in our power,

* There are about fifty cases of tubercula to one of mucosis.

we shall continue to cure chronic diseases in the above mentioned proportion to the whole number of cases.

Such is the result of the duodynamic or magnetic practice. Now it is well known to those who are initiated into the mysteries of the practice of medicine, that there is not more than about five per cent., or five cured out of every hundred cases of chronic diseases, by the old astrological or common practice, and the number of cures out of every hundred by the Homœopathic practice is about the same, or five or six out every hundred cases.

The remedies we use in these cases are magnetic and specific, and are perfectly safe for persons of all ages and conditions, and are forwarded to any part of the Union and the Canadas, by mail, express, or otherwise, according to order, free of postage or express, with full directions for their use.*

When it is known that our time is necessarily occupied every day, from morning until night, with the examination of patients by clairvoyance and otherwise, in our office, or in this city, and that we are consequently compelled to examine patients at great distances in the evening, it is hoped and believed that such patients and their friends will reflect upon our situation, and have so much mercy upon us as to give us as much information in regard to each case (no matter what it is) as to enable us to distinguish and find the patient with as little delay as

* Temporary remedies, as bleeding, blistering, emetics, cathartics, low diet, &c., &c., are prescribed by alapathists, or old school physicians, and aconite, bryonia, rhus-tox, belladonna, &c., by the homœopathists in acute or inflammatory diseases, which produce sudden derangements in the system, and run through their course in a few days, or a few weeks, and these prescriptions are often necessarily and very properly changed every day, or every one, two, or three weeks; when the disease has run through its course, and the patient either cured, dead, or the disease has become chronic; but no man who deserves the name of a physician, ever prescribes in this manner to cure chronic diseases, which come on very slowly, and gradually changes the old, and forms new parasitic, or other unnatural structures, as tubercles and white swellings of the serous and mucous surfaces, &c. as the plainest common sense would, and does teach him to learn and prescribe the specific remedies that will act slowly and safely on the old and natural forms of the system, and gradually reduce in a few months or more, the parasitic or other unnatural structures, and thus restore the general health. Nothing, therefore, so much distinguishes the accomplished physician as the readiness with which he distinguishes and prescribes for acute and chronic diseases, and on the contrary there is nothing that so much distinguishes the ass or ignoramus as the frequent changes in his prescriptions, in chronic as in acute diseases, and these rules are arbitrary and admit of no exceptions, and are equally applicable to physicians and *clairvoyants*. When, therefore, reputed clairvoyants change their prescriptions in chronic, as in acute diseases, or even once in 3, 4, 5, or 6 weeks, it is conclusive evidence that they have no clairvoyance on the subject, but are governed by *impressions* transferred from the brain of some miscellaneous personage, and these impressionists may also be known by the miscellaneous character of their prescriptions in chronic diseases, as "catnip, sage, isip, and pond-lily—white pine and wild cherry bark, squaw-vine, golden seal and spikenard—cohosh, skunk-cabbage, prickley ash, vervain, crowsfoot, and solomon's seal," &c., &c.

Now, such prescriptions of reputed clairvoyants, are not only legitimate sources of amusement to physicians, but they have a strong tendency to make new, and confirm old skeptics in their skepticism.

possible, so that we may get through with the examinations of such cases in time, each night, to have some rest from our labors.

It may also be useful to observe here that the examinations of the letters from patients is conducted in the most confidential manner, and the notes of the clairvoyant examinations of the cases taken down at the time of such examinations, and the letters answered as soon thereafter as possible.

The clairvoyant will visit and re-examine these patients under our direction, once in four or five weeks, and as she always recollects the previous examinations and compares them with the last, it is a matter of great importance, in enabling us to know the progress of the cure in each case, and to correspond with any patient on the subject, if it should become necessary to do so.

In the meantime, patients should communicate to us freely any information supposed to be overlooked or unknown to us, and deemed of great importance in the successful treatment of any particular case.

We shall employ a clairvoyant of the greatest power, and of a high order of intellect for the examination of patients at home or abroad, who will often give our patients fine specimens of the all-seeing eyes and spiritual powers of the magnetized brain.

The following is a specimen of *Clairvoyance* which occurred a few evenings since. When we had got through with the examination of letters from patients, on the evening of the 8th instant, and at about 8 o'clock, we requested the clairvoyant to look and see if there was any money coming on the way in the mails for us, and in two or three minutes, she answered yes! I see a fifty dollar bill for you in a letter, and the letter is in a bag coming from the west. Are you not mistaken in the amount? No, it is fifty, but it is not a bill, but a draft. Look and see if it is not 70 instead of 50 dollars. No, it is 50. Why, how fast it comes!—whiz!—it is coming on the railroad! The cars arrived here between 10 and 11, P. M.

We were expecting a draft from New Orleans of 70 dollars, but instead of that, our clerk on returning from the post-office on the morning of the 9th inst., brought us a letter from a gentleman in Pittsburgh inclosing a draft for 50 dollars.

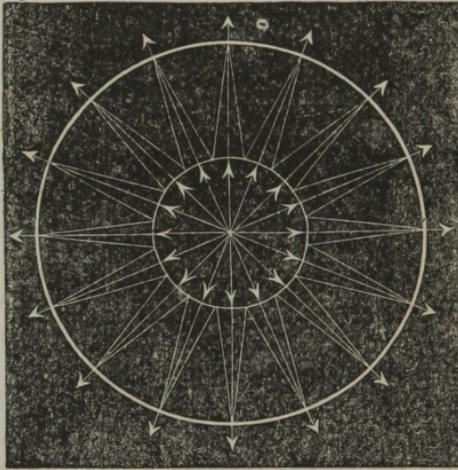
On the evening of the 10th inst., after having again got through with the examination of letters from patients, I directed the attention of the clairvoyant to the subject of the above draft, and inquired whether she knew from mere intuition it was a draft of fifty dollars for me and coming in the mail on the railroad from the west, or saw it literally? When she answered that she saw it literally, as she saw things with her eyes in her natural waking state.

INSENSIBILITY IN MAGNETIC SLEEP.

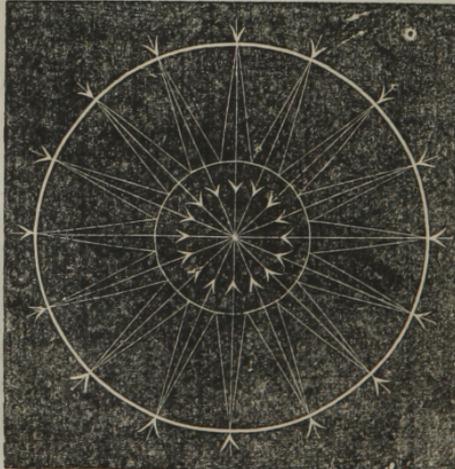
Among the extraordinary phenomena of magnetic sleep, is the insensibility of the skin, or external surface of the body often induced, and the establishment of an exaltation of sensibility in the mucous or internal surfaces, in which the natural order of the magnetism of the human system is reversed.

Now, the magnetiser reverses this order unconsciously, in the process of magnetising, by repelling the positive forces from the surface to the centre, and attracting the negative forces to the surface, and this reversal of the order of the magnetism of bodies is according to a law of these forces, and is therefore founded in nature, and easily imitated.

If a round iron, or steel plate, or disc, with a hole in the centre, representing a middle horizontal section of the body, is placed on the positive pole of a Galvanic Battery, under a moderate power, it presents the phenomena represented in the following figure :



or a negative internal, and a positive external surface ; but if we now place the plate on the negative pole of the same battery, the order of the magnetism of the plate will be reversed, as represented in this figure :



showing in the first figure the natural order of the magnetism of the body, and in the second, the induced order, in the magnetic state

PARALYSIS IN MAGNETIC SLEEP.

On a Sunday evening in August 1845, a young woman, named Emma W——, about 24 years of age, who had long been a Clairvoyant, and who had at length acquired the power of putting herself into the magnetic sleep, without the aid of a magnetizer, was at the office of the Author of this work, during his absence on professional duties, awaiting his return. A friend of his who was also staying to see him, thinking this a good opportunity to elicit the phenomena of clairvoyance with less liability of interruption than might have been afforded on a business day, requested the lady to put herself into that state, and inform him concerning the nature of the luminous atmosphere, spots and opaque body of the sun. She replied that she feared it was rather a dangerous experiment, and had heard of several clairvoyants who had suffered severely in attempting it. She nevertheless consented, saying that she would endeavor not to venture too far.

In the course of five or six minutes, she manifested all the usual symptoms of a complete magnetic sleep, and apprised her interrogator, with some slight degree of irresolution, that she was ready to attempt an inspection of the solar orb. Shortly afterwards, she evinced a highly nervous shrinking, as if from a sense of awe, and said, in answer to an enquiry, that she felt the solar influence to be too powerful for her to persist, and was afraid she would lose her senses—in her own words she feared “that her whole mind would be consumed.” She was accordingly requested to venture no farther, but remain if possible, in the position she had acquired, and describe what she saw. She then said that she had now a view of the dark body of the sun—that it was black, but highly lustrous, like “black shining melted metal;” she was confident it was highly metallic, though she could look at it no longer, as it was again closing up in a degree of brightness which she could not endure.

Whilst obtaining these answers, the gentleman in communication with her, perceived that her left arm was greatly paralyzed, and the hand became so tightly clenched that he could with difficulty rescue his fingers from the painful grasp. Speedily she announced that she was absolutely paralyzed on the whole of her left side, and was fearful that she would be convulsed all over. She added that “if she had continued so near the sun a minute longer, the influence would have killed her;” and, as it was, she knew not how she could recover from the convulsions she felt approaching, unless some powerful magnetizer could be obtained to awaken her. Shortly after this, her convulsions became so violent and alarming, as to induce the gentleman who was with her to call for assis-

tance to hold her in the chair. She became unable to speak or hear ; she breathed only at long intervals and with great labor : her right hand was kept so forcibly on her heart, that it could not be moved with the united strength of two or three persons ; and the action of the heart itself, seemed to be almost entirely suspended. The pulse were frightfully intermittent, and for long intervals, wholly imperceptible ; the eyes were open, with the pupils half buried beneath the lower lids, and greatly dilated.

In this state, varied only by convulsive paroxysms of greater or less intensity, she continued nearly four hours, when the writer, who had been detained much beyond the usual time, returned. He found her surrounded by his family and medical assistants, together with a magnetizer and a male clairvoyant who had been sent for to relieve her. Their efforts however, had produced only slight and transient effects in mitigating her condition, and we now judged it proper to attempt to establish a communication with her, as the only means of awakening her and with this view, commenced making the long magnetic passes, and then reversed them. The effect of these was very striking, even from the first : producing sudden starts, followed by greater freedom of respiration, and some degree of relaxation of the muscles. The male clairvoyant present being in a magnetic state, recommended that as soon as her arms became sufficiently relaxed, her hands should be kept in a basin of cold water, and the passes continued ; adding that under this process she would awake in twenty-five minutes, although it would require a much longer time for her to recover from what he described as her " rash attempt," the effects of which upon her brain and nervous system he minutely and lucidly described.

As soon as her hands could be placed in the water, several watches were observed, and the assigned twenty-five-minutes curiously awaited by the spectators. Precisely at the end of this period, she awoke and spoke, her whole left side, however, which had first been attacked, still remaining perfectly paralyzed, not excepting even the left arm which had been so directed as to reach the basin of water. To remove this state of paralysis, the writer found it necessary to resort to the Magnetic Machine. It was used three times a day, and on the third day the paralysis disappeared, and she was able to return to her home.

We publish this case as a caution to magnetizers and clairvoyants against gratifying the curiosity, so frequently evinced by persons ignorant of the dangerous nature of the experiment, of instituting clairvoyant explorations of the sun. This is but one out of many well authenticated instances which we might report, in which the attempt has nearly proved fatal. The planets, however, may be, and frequently are examined by good clairvoyants, with perfect safety and success.

From the New York Tribune, of October 8, 1846.

DR. FORBES ON MESMERISM.

The October number of the British and Foreign Medical Review, published in London, quarterly, by Dr. Forbes (author of *Young Physic*), "Physician in Ordinary to her Majesty's Household, Physician Extraordinary to His Royal Highness Prince Albert," contains a long review of Dr. Esdail's "Mesmerism in India, and its practical Application in Surgery and Medicine." Dr. F. is a man far advanced in life, and is placed by common consent at the very head of the Medical Profession. Up to the commencement of this year, he has been considered ultra-sceptical in reference to all new things. In the January number, 1846, he made a clean breast of his views upon Medicine, and publicly repudiated the system (Allopathy) he had all his life pursued. In the number before us, he intimates to his professional brethren that the evidences in favor of Mesmerism can no longer be "philosophically disregarded." We give an extract:

"Having, however, fully admitted the high probability of some of Dr. Esdail's statements concerning the painless character of the surgical operations; and being, indeed, from many circumstances, well convinced that a great depression of outward sensibility, if not its temporary abolition, will, in some constitutions, result from practice of the Mesmeric art, we will now proceed to the consideration of what we deem to be reasonable corollary, from this admission on our part. We conceive, then, that the evidence attesting the fact of certain abnormal states being induced by Mesmerism, is now of such character that it can no longer be philosophically disregarded by the members of our profession, but that they are bound to meet it in the only way in which alleged facts can satisfactorily be either verified or confuted—by observation and experiment. When it is positively affirmed that the Mesmeric processes will sometimes render a patient utterly insensible to the surgeon's knife, when detailed illustrations of this fact are recorded almost every day, how can we fairly reject such statements, unless we go to Nature, observe for ourselves, and demonstrate the *source* of the monstrous fallacy that is deluding members of the profession and the public alike? Indeed, we hesitate not to assert that the testimony is now of so varied and extensive a kind, so strong, and in a certain proportion of cases so seemingly unexceptionable, as to authorize us, nay, in honesty to *compel* us to recommend that an immediate and complete trial of the practice be made in surgical cases. If experience like that which Dr. Esdail relates to us be but true in one-tenth, nay, one-hundredth of its particulars, we hold that a case is made out demanding searching inquiry. If Mesmerism, even in its humbler pretensions, be absolutely untrue, let it be *proved* to be so. If careful observation and repeated experiment lead to the detection of some hitherto hidden cause of error and mistake that has deluded and mystified the more honest class of Mesmerists, what a service will be rendered to humanity and to truth if this can be proclaimed on perfectly just and adequate grounds. In how much better a position shall we be *after investigation* for confuting the imposture, if such it shall turn out ultimately to be, than in continuing to treat the subject with contemptuous disregard! Of one thing let us rest assured, not only the public, but the more sober thinking of the profession will, ere long, hold those at a disadvantage, who, in opposition to *facts*, apparently well authenticated, can or will but adduce mere unsupported argument, or ridicule.

"There would appear to be to conditions attaching to any novel practice in medicine, independently of the authority by which it comes recommended, that should influence its title to a fair trial; *first*, the extent of the anticipated benefit, and, *second*, the degree of possible mischief attending its employment. Now, the *promised* advantages of Mesmerism in surgical operations correspond with these requirements in an eminent degree. If the statements be corroborated, and if insensibility *can* be produced artificially, surely the immense acquisition both to operator and patient is obvious at once; and, according to all the evidence that exists upon this subject, mischief very rarely follows the practice of Mesmerism in the event either of success or failure. "I beg to state," says Dr. Esdail, "that I have seen no bad conse-

quences whatever, ensue from persons being operated on in the Mesmeric trance. Cases have occurred in which no pain was felt, even subsequent to the operation, and the wounds healed by the first intention; and in the rest I have seen no indication of any injurious consequences to the constitution. On the contrary, it appears to me to have been saved, and that less constitutional disturbance has followed than under any ordinary circumstances. If then *good* is possibly to ensue, and *mischief* is but little to be feared from the experiment, why not candidly make it? Assuredly experiments in therapeutics are constantly made on grounds far less reasonable. If a single practitioner of any eminence recommend some novel and heroic treatment in serious disease, multitudes are ready to try it; however perilous to the patient the trial, *a priori*, may appear. Although at the present day, it is pretty well made out that pneumonia, in many instances, will come to a successful issue with little depletion, some dozen years since large numbers of the profession, especially in France, did not hesitate, on the recommendation of M. Bouillaud, to bleed *coup sur coup*; and, about twenty years ago, when Dr. Armstrong bled largely, and administered heroic doses of calomel in the incipient stage of fever, many persons felt themselves authorized in adopting the treatment experimentally. Yet, in these instances, a degree of risk to the patient was incurred in the attainment of the possible benefit, and there was, moreover, an uncertainty in deciding upon the exact nature of the result, which, as regards Mesmerism in surgery, would not be experienced. Again, we say, let it be *tried* upon patients about to be submitted to the knife; if true, let us have the benefit of it, and if false let the falsehood be *demonstrated*."

HOMŒOPATHY.

The following case is extracted from the American Journal of Homœopathy, of August 15, 1846, p. 101.

Mrs. B., aged 55, of a sanguine, nervous temperament, had been sick for three years. One year ago a record was made of her case, and seemingly the most appropriate drugs administered, with only an occasional partial mitigation. The attacks became severe, and were wearing out one of the best constitutions. This lady is intelligent, and one of the firmest advocates of Homœopathy, notwithstanding she could herself procure no relief from it. The *law of cure* she knew to be true: but the remedy was wanting. Lately another record was taken of this case, which was as follows.

Pain on the top of the head in the morning, swimming in head when stooping or rising, cloudiness of the eyes, soreness of mouth and throat, dry cough in the morning, attacks of tearing pain, sometimes stinging and sharp, commencing in the stomach and extending to the sides, and shoulders, and nape of the neck with stiffness; distress in stomach like a weight, mitigated by eating; sense of fullness in stomach; wind on stomach, eructations; cannot bear the pressure of even light clothes. Pain in the bowels, bearing down, or pressing pain; pain in the left side, as if something adhered to the lower ribs. Constipation; sense of dragging and falling in abdomen; pain as if in the bones, like rheumatism; jerking of the feet in the evening. Numbness of the arms, with pricking in the fingers. Sleep disturbed, frequent wakings; pain in the stomach at night. Fatigue from walking; excessive debility; sufferings aggravated on change of weather. The pains are tearing, stinging, pressing and shifting—sometimes on the left, and sometimes on the right sides; and then on both sides at the same time: some of them aggravated by movement, and others mitigated by lying down and rest.

The attacks had occurred daily at five o'clock, P. M., and almost invariably at night, awaking her from sleeping, there had been no intermission for months.

As I had been trying *rhus radicans* on myself for some weeks, I was struck with the peculiar stinging, pricking pains of this case as corresponding to those I had experienced in my own person by the above drug. On the 26th of June last, at 4 o'clock P. M., I gave her three globules of the third dilution of *rhus radicans*. Has had no attack since;—her health improved, and it is now good. S—.

The above is a plain case of chronic tubercula of the muscles, (chronic rheumatism) and is invariably distinguished in an instant by the pain produced by pressure with the thumb and fingers on the back of the neck. This would not, however, answer for the homœopathist. He must make a minute record of every old astrological symptom he can find in each case, and then commence a search in his books for the medicine which is homœopathic to them, or produces the same symptoms in a state of health. It will uniformly require from three to four hours' search to find the medicine, and in the meantime the wind has often changed, and the symptoms of which the doctor had made a record have also changed entirely with the wind, as every old woman knew they would, before the record was made, and this was the reason why the "seemingly most appropriate drugs were administered with only an occasional partial mitigation." The doctor, however, had fortunately been trying *rhus radicans* on himself, and was struck with the peculiar stinging, pricking pains of this case, as corresponding to those he had experienced on his own person in a healthy state, by the above drug, and gave the lady three globules of the third dilution, when the disease disappeared—"her health improved, and it is now good," or, in other words, the disease was cured with *one* homœopathic dose of *rhus radicans*.

On reading this case, we sought for, and luckily obtained, a few doses of the precious drug, and soon prescribed it in ten cases of chronic rheumatism, with the "peculiar," or "stinging and pricking pains." In six of these cases the symptoms were apparently palliated temporarily, but in the other four cases no effect whatever was observable.

We could give a great number of cases of chronic tubercula of the *organs* and *muscles*, and also of chronic mucosis of the organs and muscles, which have been under the treatment of the most distinguished homœopathists from three months to three years, with no other effect than that of an occasional partial mitigation of the symptoms. Yet the homœopathic treatment of diseases is greatly superior to the old allopathic practice in curing acute, and mitigating the symptoms in chronic diseases.

HAHNEMANN ON CHRONIC DISEASES.

EXTRACTS.

“AURUM (Gold.)

“In the same way as superstition, incorrect observations, credulity and baseless conjectures have been the cause of a great many false statements as to the pretended remedial virtues of certain medicines, that have been received into the old *materia medica*; a great many powerful medicinal substances have been set aside as inefficacious for want of experiment, and upon the strength of frivolous theoretical reasonings.

I may here only mention *gold* as illustrative of my assertion; not the gold which has been dissolved by acids and reobtained again from the solution by precipitation—these two kinds of gold have, both of them, been pronounced dangerous and even useless, because they cannot, without danger, be administered *justa dosi*, in an excessive quantity: No, I speak of the pure, unaltered gold.

“Modern physicians have pronounced it inefficacious, and, by banishing this remedy from their system of *materia medica*, they have deprived us of the brilliant remedial virtues of that drug.

“They said ‘that it could not be dissolved in the gastric juice, and that it was therefore powerless and useless.’ Such *theoretical speculations* were received in the place of *convictions*. Bold decisions, empty theoretical conjectures, have almost always, in medicine, been taken in the place of well founded truth: *it is so much more convenient, simply to assert*, than to interrogate experience, which, however, is the basis of the art of curing.

“They cannot avail themselves of the excuse that gold has also been condemned by older physicians.”

“*They are all of them wrong, and all the modern physicians into the bargain.*

“*Gold has great remedial virtues, which cannot be replaced.*”

“I have an aversion to employ metals dissolved in acids, were it for no other reason than simplicity. And then, their properties must necessarily be altered by the acids, as may be seen by comparing the medicinal virtues of the corrosive sublimate with those of the oxyde of mercury. I therefore was much pleased on discovering that many Arabian physicians praised the remedial virtues of gold when administered in the shape of a *fine powder*, in many affections, against which I had already employed the *solution of gold* with great benefit. This circumstance was of course calculated to inspire me with confidence in the assurances of the Arabian physicians.”

“I forbear quoting the eulogies which have been bestowed upon the powdered gold” “Suffice it to say, that I credited the testimony of the Arabians more than the theoretical doubts of modern physicians, and employed the finest leaf-gold, after having triturated it for an hour with 100 grains of sugar of milk.”

“Gold is especially suitable to scrofulous and venous constitutions, to the melancholy and phlegmatic temperament, to individuals with blond hair, indolent habit, and soft, lax fibres.” “*Hypochondriasis*.—Hysteria, hysteric spasms and convulsions.—Epilepsy.—Chlorosis.—Falling down without any consciousness.—*Chronic icterus*.—*Nightly pains of the bones*; inflammation and caries of the bones, especially after the abuse of mercury.—Injuries from abuse of mercury, especially when complicated with syphilis.—Secondary syphilis.—Scrofulosis.—Tubes mesenterica.—Arthritic nodosities; arthritic symptoms consequent upon sexual and mercurial abuses.—Dropsical affections.—Herpes of the prepuce.—Warts and condylomata of the tongue, prepuce, and anus.—*Weakness of the mind and memory*, mental fatigue, consequent upon great exertions of the mind.—*Melancholia*, with loathing of life, and inclination to commit suicide.—Spleen; melancholia of every kind.” “Gold also holds special relations to a depressed state of the sexual organs, to diseases of the genital organs, and especially of the testicles. This latter circumstance is remarkable for this reason, that persons who had committed suicide, have been found to be affected with diseases of the genital organs, especially hydatids upon the ovaries and testes. *Chronic congestion of the blood to the head*.—Hysteric headache.—Megrim.—Headache, consequent upon mental exertions.—

Exostoses on the skull.—Caries of the mastoid process.—Simple, violent *scrofulous inflammation of the eyes*, especially accompanied by great intolerance of light.—Obscuration of the sight by black spots hovering before the eyes. *Visus nebulosus*; half-sight; apoplectic and abdominal amaurosis; amaurosis consequent upon suppressed anger.—Spots upon the cornea?—*Otorrhœa, consequent upon caries of the ossicula auris and the mastoid process.*—*Thick tip of the nose in scrofulous individuals.*—*Ozæna*, with thick, yellow matter, which is partly liquid, partly blown out in the shape of solid clots, and always accompanied by a loathsome stench from the nose; want of smell, and continual obstruction of the nose; *Ozæna syphilitica et scrofulosa*; *Ozæna, with caries of the nasal bones.*—Carcinoma of the nose.—Swelling and ulceration of the lips in scrofulous individuals. Inflammatory prosopalgia consequent upon abuse of mercury. Caries of the bones of the face.—*Congestive toothache*, toothache consequent upon congestion of the blood to the head, with heat in the head.—Looseness of the teeth.—Ulceration and caries of the palate.—Syphilitic ulcers of the fauces and the tongue.—Scirrhus induration of the tongue.—Swelling and ulceration of the tonsils.—Nightly colic, with flatulence.—Ascites and anasarca.—*Inguinal herniæ*, both when hereditary and consequent upon cold, especially in children.—Constipation, originating in atony of the intestinal canal, or when accompanied by strangulated hernia.—Hæmorrhoidal obstruction of the rectum.—Ischuria.—Excited sexual instinct.—Too frequent nightly pollutions. *Acute and chronic orchitis*; swelling of the testicles, of considerable extent and great hardness, consequent upon removed redness and painfulness.—Prolapsus and induration of the womb.—Exostoses of the pelvic bones.—*Chronic obstruction of the nose.*—*Chronic catarrh and purulent coryza*; ulceration of the Schneiderian membrane, with puriform, ichorous, stinking discharge.—Influenza.—*Stinking breath.*—*Congestion of the blood to the chest, and congestive asthma.*—*Suffocating fits, with violent constrictive oppression of the chest.*—Paralysis and hepatization of the lungs.—*Violent palpitation of the heart*, occurring in paroxysms several times during the day, and consequent upon congestion of the blood to the chest and heart, accompanied by anxiety and oppression.—*Arthritic metastases to the heart*, especially when taking the form of palpitation, suffocating anxiety and oppression of the chest.—Stenocardia.—Chronic affections of the heart, producing hydrothorax, especially after abuse of mercury.—Exostoses of the bones of both the upper and lower extremities.”

Such is the long list of chronic diseases in which Hahnemann recommends the use of the trituration of gold in sugar of milk. He besides recommends its use in a very long list of the common symptoms in chronic diseases of all the different organs, and as a remedy the virtues of which cannot be replaced.

We should here observe that the experience of the homœopaths of the present day, as well as our own, has shown in the most conclusive manner, that the above preparation of gold has no other curative power in the cases enumerated by Hahnemann, than that of palliating the symptoms—it does not cure the disease—the power of this preparation of gold being too feeble to effect a cure in a case of any importance.

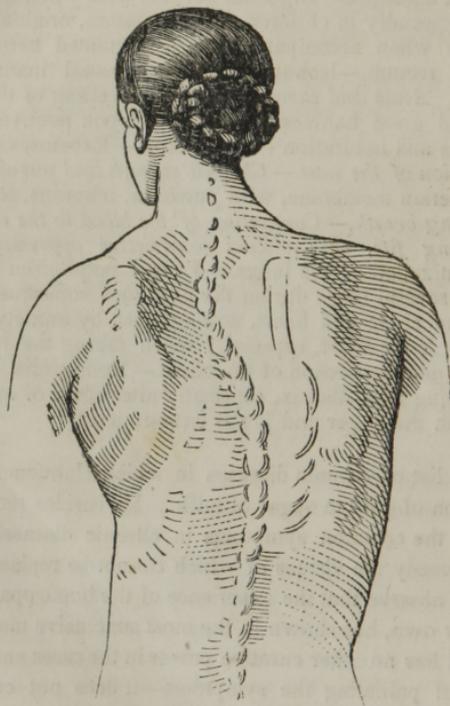
We should also observe that no dependence whatever can be placed in any other homœopathic remedies, except as mere palliatives in these cases, or in the symptoms above enumerated in the cases of chronic diseases of the organs.

Hahnemann was unfortunately unacquainted with the infinitely superior preparation of gold which we have introduced in this continent; and with the invariable and ever-reliable symptoms of chronic diseases, which are detected by pressure on the ganglions of the posterior spinal nerves.

LATERAL CURVATURES OF THE SPINE.

William W. Kinne, M. D., of Trumansburgh, Tompkins Co., N. Y., has been treating lateral curvatures of the spine and also distortions of the spine and of the limbs, during the last year (1846), with great success. The Doctor took plaster casts of the curvatures and distortions before he commenced the treatment, and also at different periods during its progress and at its termination. The following engraving, Fig. 1, is from a drawing by C. Muyr, of the first cast of Miss Mary B. B., of Ithaca, N. Y., aged 16 years.

FIG. 1.



The curvature commenced seven years before the cast was taken, and at the end of four and a half months thereafter, another cast was taken of Miss M. B. B., showing a very great improvement in the case, as seen in the engraving, Fig. 2, and leaving little doubt but that in a month and a half more, or six months from the time of the commencement of the treatment the spine would be straight and the form perfect.

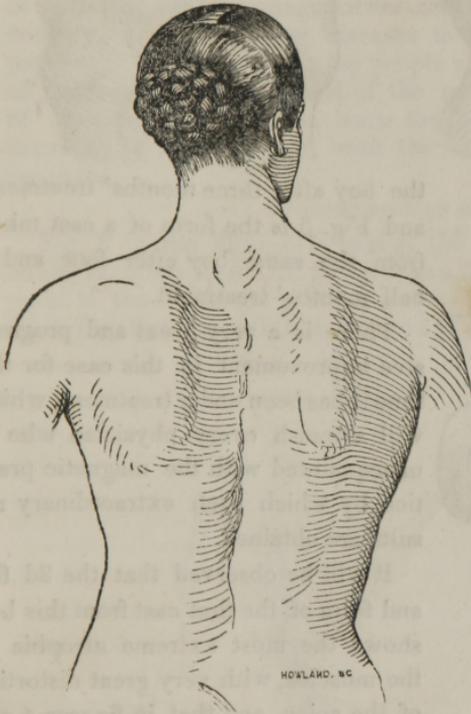
We have also a cast of a lateral curvature, taken by the Doctor at the commencement of the treatment of Miss M. P., of Hector, N. Y., aged 17 years. The curve commenced when she was between four and five years old, and grew with her growth. The cast shows it to be a very

bad case, and the spine, at its greatest curve, an inch and a half from the median line. The second cast of this case taken after nine months treatment shows the spine straight.

A cast of lateral curvature of the Spine, which the Doctor took of Miss M. V. S., of Ithaca, N. Y., aged 13 years, and of three years standing shows a deviation of the spine of one inch from the median line, a very bad form and poor health. Another cast taken after eight weeks treatment of the same case shows a straight spine, improved health and a perfect form.

There was in all of these cases, like every other of lateral curvature, a contraction and thickening of the muscles or veritable white swellings on the outside of the curves. They are all cases of tubercular disease of the muscles, and it is the contractions of the muscles on the outside of the curves and consequent atrophias of those on the inside that make

FIG. 2.



the deviations from the median line.

The white swelling of the right scapula or shoulder-blade in the case of Miss M. B. B., Fig. 2, which produced the deviation in her spine, is not, it will be seen, entirely reduced, and consequently the spine has not entirely resumed its natural position.

The course the Doctor adopted to reduce these curvatures, was first to reduce the white swellings with the specific remedies for tubercula and the action of the magnetic machine, when the spines resumed their natural positions, and this is the only philosophical and only successful practice in these cases.

In consequence of the great increase of the business of reducing lateral curvatures of the spine, and distortions of the spine and limbs, Dr. Kinne has been invited to establish himself in in this city, and in a letter from him a few days since (Dec. 12), he informs us that he has concluded to accept the invitation, and will have rooms in this city to accommodate his patients, in the course of the month of March next.

DISTORTIONS OF THE SPINE AND CARIES OF THE VERTEBRÆ.

Fig. 3 is the form of a cast taken by Dr. Kinne, at the commencement of the treatment, of Almond Beach, of Cuba, Alleghany co., N. Y., aged 13 years. The distortion commenced when he was five years old, and grew with his growth. Fig. 4 is the form of a cast taken from

FIG. 4.

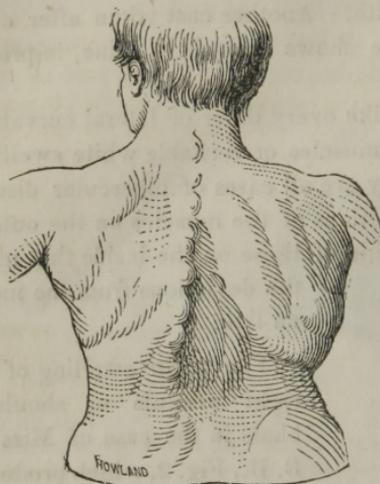


FIG. 3.



FIG. 5.



the boy after three months' treatment, and Fig. 5 is the form of a cast taken from the same boy after four and a half months' treatment.

There is a very great and progressive improvement in this case for the time it has been under treatment, which will astonish every physician who is unacquainted with the magnetic practice by which such extraordinary results are obtained.

It will be observed that the 3d fig. and form of the first cast from this boy shows the most extreme atrophy of the muscles, with very great distortion of the spine, and that in figures 4 and 5 the atrophied muscles are progressively developed in the same proportion with the reduction of the distortion

and these changes have progressed in the same manner in all the cases we have treated.*

* We have always on hand cases of distortion of the spine and caries of the vertebræ. We had 16 cases in 1844, aged from one to eight years, and they are now all well and their spines straight, excepting only two who were too far advanced in the disease to be cured.

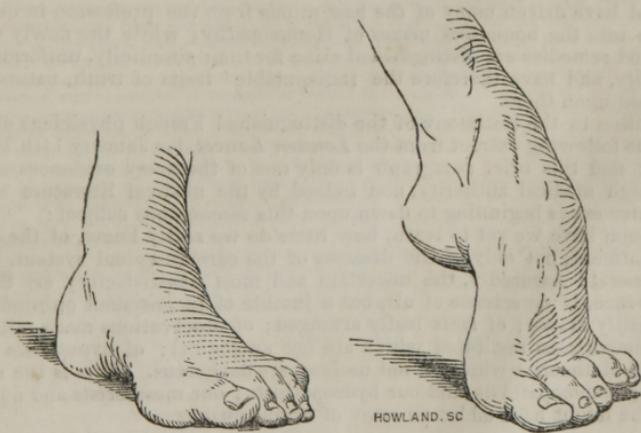
We see the same progressive changes and in the same order, in lateral curvatures of the spine, as seen on a comparison of Fig. 1 with Fig. 2, and of the other casts in our possession, before described, and these changes have also progressed in the same order in all the cases we have treated; and in all of which allopathy, homœopathy, hydro-
 pathy, chronopathy, and all other pathies, are equally and entirely at fault. And now it should be remembered, and never be forgotten, that the magnetic or duodynamic practice reduces in the most safe and prompt manner, the enlarged, thickened, swelled, hypertrophied, or tuberculated portions of the organs in the same order as in the above cases of tuberculated and atrophied muscles, in lateral curvatures and distortions of the spine, as we have demonstrated in the clearest manner time out of mind. Yet the professors of our medical colleges continue to teach the old antiquated astrological practice, and the people are apparently doomed to be drugged to death like their fathers in all future time; but the study of anatomy and physiology is being introduced in our primary schools, and the manikins and magnetic machines are abroad, with the lecturers on the magnetic symptoms and treatment of diseases, and the magnetizers are raising their signs in town and country, and are curing diseases in a prompt, safe and satisfactory manner. In the meantime the people are obtaining a general knowledge of anatomy, physiology, and of the magnetic symptoms and treatment of diseases, and will soon learn the professors of these colleges the necessity of keeping pace with the improvements in the practice of medicine.

DISTORTIONS OF THE LIMBS.

Fig. 6 is the form of a cast of the lower part of the leg, foot and ankle, of a boy aged 13 years, taken by Dr. Kinne, at the commencement of the treatment; and Fig. 7 is the form of a cast taken from the same leg, foot and ankle, at the end of six weeks thereafter.

FIG. 7.

FIG. 6.



The boy used the limb many years in the form and manner seen in Fig. 6; and the Doctor observes that, "in the treatment of the foot with which I presented you casts, one taken six weeks after the other, without any cutting of tendons, or other operation, we relied entirely upon the magnetic machine and frictions to restore the action of the paralysed muscles."

RECAPITULATION.

ADDITIONS TO MEDICAL SCIENCE.

A candid examination of the more prominent subjects of the preceding pages, will establish the following important facts:—

1. That, prior to the publication of the first edition of this work, in 1836, very little was known of the true characteristics of tubercular disease of the organs, limbs, and other structures, beyond the general and obvious fact of the destruction of life which it produces. Nothing was known of the accordance of the natural and invariable symptoms of this seemingly Protean disease with the laws and phenomena of physiological magnetism here developed; and, therefore, nothing of the magnetic or strictly appropriate remedies.

2. That, since that time, the author's original views of the subject, and many of his most novel and startling positions, have been fully confirmed by the recent disclosures of M. M. Lugol, Louis, Lisfranc, Debrayne and others, of the Parisian schools, and received with great respect by the medical profession.

3. That the invariable precision of these natural symptoms and the uniform success of these appropriate remedies, entitle the latter to the rare distinction of a specific; and, when viewed in connexion, corroborate, in the strongest manner, the magnetic theory which the author deduced from them, in advance of all other writers.

4. That a great number of chronic diseases which were supposed to be characterised by different symptoms, however equivocal, and to require different remedies, however uncertain, are now shown to belong to the same class, or to be, in fact, one and the same tubercular disease, affecting different parts of the system, instead of being different in itself; and requiring the same specifically appropriate remedy, instead of the various remedies selected in reference to particular symptoms, and confessedly used by way of experiment. And this conclusion, also, is entirely sanctioned and confirmed by the eminent French physicians above named.

5. That besides the great error of medical writers, in supposing that the old and ever-varying symptoms, which they adopted, indicated a variety of distinct diseases, they were led into another pernicious error, in inculcating and practicing upon the universal belief that these symptoms indicated peculiar *inflammations*, requiring *depleting* remedies, with all their torturing appliances; the consequences of which are now seen to be absolutely appalling. In short, intricacy and irregularity, disappointment and fatality, the natural offspring of pertinacious ignorance, clothed in the imposing garb of learning and experience, have every where attended the prevalent theory and practice, and have driven many of the best minds from the profession in disgust, and many others into the boundless mazes of Homœopathy; while the newly discovered symptoms and remedies are distinguished alike for their simplicity, uniformity, stability and utility, and have therefore the indisputable traits of truth, nature, and science, stamped upon them.

6. In addition to the testimony of the distinguished French physicians above mentioned, is the following extract from the *London Lancet*, for January 14th 1843, to the same effect; and this brief paragraph is only one of the many evidences afforded by that very high medical authority, and indeed by the medical literature of the day, that a brighter era is beginning to dawn upon this momentous subject:

"How much have we yet to learn, how little do we really know, of the nature and rational treatment, not only of the diseases of the cerebro-spinal system, but of diseases in general! Assuredly, the uncertain and most unsatisfactory art that we call medical science, is no science at all, but a jumble of inconsistent opinions; of conclusions hastily drawn; of facts badly arranged; of observations made with carelessness; of comparisons instituted which are not anological; of hypotheses which are foolish; and of theories which, if not useless, are dangerous. This is the reason why we have our homœopaths, and our hydropaths; our mesmerists and our celestialists!" and he might have added an army of arrant quacks.

Mr. Wakley, M. P. in his editorial article, in the same number, advises the members of the medical profession, to commence collecting facts, in their several districts, *de novo*, on which to found, at a future period, a rational and effectual mode of treating diseases.—

The illiberality with which I have been treated, by many of the leading men of the

profession, while I have been alone engaged, through a long series of years, in establishing the true character and great importance of the new symptoms and remedies, in chronic diseases, and in the only way in which I could hope for success, will fully justify me, in thus exposing to the public in the years of my triumph, the heartless impositions those men are constantly practising.

Among their most plausible false issues against me, was that in which they charged me with prescribing these remedies in all diseases, and in consequence of which I was compelled to limit their public use, to a much less number of cases, than that to which I knew them to be applicable, and to which I shall now direct the attention of the *gentlemen* of the profession and the public, in a very concise manner.

7. Besides the cases in the preceding pages, in which I have shown these remedies to be applicable and specific, they will be found to be equally so, in all the cases of chronic disease not before noticed, in which the magnetic symptoms develop tubercular disease. Among these cases are, Tic Doloieux; Nervous head-ache; Sterility St. Vitus' Dance; Paralysis; Epilepsy and Insanity in young subjects; Chronic, Diarrhœa, and Chronic Dysentery.

8. Besides the *common* cases of chronic diarrhœa, nineteen cases out of twenty of those who are said to die of Bilious Fever, actually die of chronic diarrhœa or chronic dysentery, from ulceration of the intestines; all, or very nearly all, of which would be saved, as I have often ascertained, by the use of these remedies, immediately after the inflammatory symptoms have subsided. They will in fact *cure every case*, when we commence their use before the ulcers have penetrated through the peritoneal coat of the intestines. When therefore such patients do not begin to gain strength, immediately after the inflammatory symptoms have subsided, no time should be lost in commencing the use of these remedies, *if you wish to save such patients*.

9. Let me now direct your attention to *Cholera Infantum*,—to the *summer complaints of little children*, who are carried off by thousands every year, while the repulsive and expansive force of the atmosphere is prevailing over its attractive and contractive force, almost every one of whom may now be saved, by the attractive and contractive force of these remedies, *even in the last stage of the disease*, as I have often demonstrated in the clearest and most satisfactory manner. And now let me caution the mothers of these children against the arts that are practiced by many physicians, to first obtain, and then maintain confidence in their families at all hazards, without regard to any other principle than that of making money, notwithstanding their professions to the contrary; and besides, these mothers should never, never forget the fact, that such physicians would always rather see their patients die, under the use of their remedies or prescriptions, than see them recover under other treatment. However the announcement of this fact may shock and appal, it is nevertheless sternly, solemnly true; and is one of those dreadful secrets of human nature, of which it has at last become my painful duty to reveal.*

10. From facts which have recently come to our knowledge, patients at least, have much greater cause for apprehension from the pretended favor and "*patronage*" of the new principles, and practice by many of the sages here referred to, than from the utmost hostility they could possibly exert. We have been aware, for some years, of instances in which physicians, when urged by the importunities of their patients, have professed a familiar acquaintance with the constituents and composition of our remedies, and pretended to administer them; but it is only latterly that we have become informed of the extraordinary extent and cruel consequences of this contemptible imposition. The effects of these remedies, in cases abandoned as hopeless under ordinary treatment, has forced itself irresistibly, upon the attention both of sufferers and tormentors, in all parts of the country, and physicians have been compelled to assent to the notorious reality of facts which they could not deny. But instead of honestly adopting these remedies, as prepared for their hands, and of the manufacture of which they are entirely ignorant, they claim the knowledge and mastery of both; and thereupon deceive and abuse the confidence of their patients by concocting prescriptions based upon merely conjectured and consequently inadequate points of resemblance. If they really could prepare these remedies, we certainly should not have the slightest objection to their doing so, but, on the contrary, should rejoice at the benefit that would thus be conferred on the whole community. But, knowing as we do that the extremely peculiar processes, both chemical and pharmaceutical, which are absolutely indispensable to the preparation of these remedies, cannot possibly be conducted except in a laboratory, and by means of utensils expressly constructed for the purpose, we know that every professed imitation of them must be an imposition, and that even the most explicit and detailed description of their manufacture that we could publish, would only tempt the cupidity of such unscrupulous imitators to multiply the production of spurious remedies, by easier and less expensive means. Indeed, it is thus that many remedies, heretofore highly and justly celebrated in the history of medicine, and truly valuable, while their composition and administration were in experienced and skilful hands, soon became utterly inefficient and worthless, when entrusted to ignorant pretenders, and have accordingly sunk into unmerited oblivion. And no men are better acquainted with this fact, than those who condemn us for not adding our now invaluable remedies to the number that have thus become extinct, by subjecting them to the same inevitable cause of deterioration.

* The most overwhelming and conclusive evidence on this subject is, we are sorry to say, of daily occurrence with the *curs* and *whippers-in* of the medical colleges.

PROFESSIONAL APHORISMS

1. The "savoir dire," the "savoir faire," an agreeable exterior and good manners, the knowledge of the world, a certain "je ne sais quoi," which pleases and attracts, are turned to excellent account by some physicians. But it will not do to examine such gentlemen too narrowly; we must not blow too strongly upon this froth; for the prestige quickly vanishes. These qualities are, indeed, to the character what embroidery is to a garment, whose web is of no great value.

2. "*An enlightened ignorance*;"—these words, although seemingly contradictory, express an important truth. It is given but to very few to reach this high degree of philosophic truth.

What study, what watchings, what meditation, how much judgment and modesty are required to know that we know but little, to estimate at their real value the acquisitions of science, to arrive at length at those limits where it is written "*unknown*." Montaigne, with much truth, distinguishes the abecedarian ignorance and the doctoral ignorance; the latter requires a whole lifetime's labor to attain to.

3. *Bloodletting* is a very efficacious remedy in pneumonia; *tartrate of antimony* in large doses will often cure this disease; *opium* also may claim considerable success; and *musk* has saved not a few cases. But tell us, you say, with precision, when are we to resort to bleeding, when to antimony, when to opium, and when to musk? We are almost compelled to admit that we cannot. It is the same with almost all pathological affections.

Shall we ever see the time, when we shall no longer be acting with hesitation and uncertainty, or pronouncing upon *vague symptoms*, and groping our way upon mere conjectures?

4. What is the cause of the bitterness of one physician against another? Why does he blame him in everything, and on every occasion? The truth is, he is occupied with the same subject, and he has been less successful. Do you not see the caterpillar abusing the work of the silkworm?—and yet the caterpillar can spin also.

5. It is really absurd and ridiculous to see ourselves so often outstripped in the medical race by dolts and fools; and yet it is a disgrace and reproach to succeed after the fashion of some people.

6. There are some writers, whose language, by being strong, compressed, and profound, exacts so much from the thought, that it is called obscure and unintelligible. The author of the *New Elements of the Science of Man* is an example of this style. A physician said once to this great man:—"Your book is much too difficult to be understood." "Patience," replied Barthez, "I am preparing an edition which will be so clear that every ass will be able to drink from it."

An acute sense, much knowledge, a superior reason, and a rare talent of disentangling truth from fiction and from mere probability, are necessary to enable us to form a just appreciation of theories and principles, and of their application to practice. Whoever has not acquired these qualities is condemned, like the crowd, to follow the standard of another, and to fall into either an irrational skepticism, or an empirical routine, which is too often dignified with the appellation of experience.—*Gazette Medicale*.

An experienced nurse is seldom able to describe the plainest case, without employing a phraseology of which every word is a theory; whereas a simple and genuine specification of the phenomena which mark a particular disease; a specification unsophisticated by fancy, or by preconceived opinions, may be regarded as unequivocal evidence of a mind trained by long and successful study to the most difficult of all arts, that of a faithful *interpretation of nature*.—DUGALD STEWART.

From the New York Lancet.

A LIST OF MEDICAL AND SURGICAL CHARGES,

Adopted by the Associated Physicians and Surgeons of the City of New York, Dec. 1815,
and approved by the New York County Medical Society, Jan. 2, 1816.

Verbal advice.....from 00 to \$5 00	Extirpation of testis.....50 00
Letter of advice....." 10 " 15 00	Do. of eye.....100 00
Ordinary visit....." 0 " 2 00	Do. tonsils.....25 00
Consultation do.....5 00	Do. tumor.....5 to 50 00
After visits, each.....3 00	Perforating rectum.....25 00
Night visit.....7 00	Do. nostrils, external ear, vagina, or ure-
Visit at a distance, per mile.....1 50	thra.....5 to 25 00
Do. to Brooklyn.....3 00	Dividing the frenum linguæ or penis 3 " 5 00
Do. to Powles' Hook, summer.....5 00	Paracentesis of abdomen.....15 " 25 00
Do. to Staten Island.....10 00	Do. of thorax.....50 00
Both these last to be doubled to winter	Operation for tic douloureux.....25 00
or storm.	Do. for harelip.....25 00
First visit in epidemic, or other diseases	Do. for hernia.....125 00
where personal danger is apprehended 5 00	Do. fistula in perineo.....50 00
Each succeeding, under the same circum-	Do. fistula in ano.....50 00
stances.....3 00	Do. for phymosis.....10 00
Vaccination.....5 to 10 00	Do. fistula lachrymalis.....40 00
Each dressing of a wound.....1 " 5 00	Do. paraphymosis.....10 00
Cupping.....5 00	Do. wry neck.....50 00
Bleeding in arm or foot.....2 00	Do. depressing cataract.....125 00
Do. in jugular vein.....5 00	Do. extracting do.....150 00
Dressing blister.....1 00	Do. anterior of Saunders.....25 00
Scarifying eye.....5 00	Do. popliteal aneurism.....100 00
Inserting œdematous swellings.....2 00	Operation for carotid aneurism.....200 05
Inserting seton.....5 00	Do. for inguinal or external iliac.....200 00
Do. issue.....2 00	Do. brachial.....50 00
Visits in haste to be charged double.	Do. radial, tibial, or ulnar.....25 00
Detention, \$3 per hour. Do. \$25 per day.	Lithotomy.....150 00
Introducing catheter.....5 00	Bronchotomy.....25 00
Each succeeding time.....2 00	Trepanning.....100 00
Do. in females.....5 00	Circumcision.....10 00
Extracting calculus from the urethra 20 to 30 00	Common case of midwifery.....25 to 35 00
Reducing simple fracture.....10 " 20 00	Tedious or difficult cases.....36 " 60 00
Do. compound fracture.....30 00	Case of gonorrhœa.....15 " 30 00
Do. dislocations.....5 to 20 00	Do. syphilis.....25 " 100 00
Of the hip.....30 " 50 00	Preparing and administering enema.....2 00
Reducing prolapsus ani.....5 00	Visit on board a vessel at the wharf.....2 50
Do. hernia.....10 to 25 00	Do. in the stream.....5 00
Opening abscess.....1 " 5 00	Do. at Governor's Island.....5 00
Amputation of the breast.....50 00	Do. for opinion involving a question of
Do. of leg.....50 00	law, and in which a physician may
Do. hip or shoulder.....100 to 150 00	be subpoenaed.....5 00
Do. finger or toe.....10 00	Extracting tooth at patient's house.....2 00
Do. penis.....20 00	Do. at surgeon's.....1 00

This scale of charges continues to the present time, and has undergone no material modification during the last thirty years. Some of the items are highly amusing; thus the charge of from \$10 to \$15 for a "letter of advice," looks very much like a provident insurance against the effects of mistakes upon the reputation and emoluments of the physician, and it is only to be deplored that the scheme contains no similar provision in behalf of the unfortunate patient. So, again, the charges as aggravated by the state of the weather and personal danger from an epidemic. The ordinary fee, it has been seen, for a visit to Staten Island, performed by

the regular ferry in thirty minutes, is \$10; in winter, or stormy weather, double the amount, or \$20; and if the case be yellow fever, "or other diseases where personal danger is apprehended," \$5 more, making the visit worth \$25. But it is doubtless intended as a compliment to their own professional skill that they charge so much less when personal danger is apprehended from an epidemic, than when they have merely to face bad weather. \$10 is the charge against a storm, while a plague or pestilence escapes with only \$5! But we leave the analysis of this list to the reader himself, as a rich source of amusement, except in instances where personal or domestic experience has proved it to be too true for a joke. The lucrative advantages conferred upon the profession by the above association of physicians and surgeons, became so manifest that, in a few years, further improvements in the management of the patients were naturally suggested with a view to the same objects. Accordingly, in the year 1823, another association of physicians and surgeons was instituted, called the "Kappa Lambda Society." One of the regulations of this fraternity was to tax the druggists a heavy per centage for the privilege of putting up the prescriptions given to patients by the members; and these prescriptions were so framed as to enable the druggists amply to remunerate themselves for the tax imposed, by making up a large bulk of cheap ingredients, colored water, &c., and charging the patients according to quantity, "in every case where they will stand it." Thus was established, by means of a secret compact, a monopoly insuring a large amount of "quarterly revenue."

The contempt with which these "Kappa Lambdas" affect to look down upon the Homœopathic practitioners, who prescribe diminutive quantities of medicine affording no opportunity of exacting a revenue from the druggists, is more easily imagined than portrayed; and the horror they naturally feel and express is unbounded when they learn, as they often do, that one of their patients has purchased a box of magnetized gold pills, which is to last three or four months, for *eight* dollars; and their consternation is excruciating when, in a few months, they find that these patients, from whom they had long derived an annual revenue of from \$50 to \$500, have entirely recovered their health, and these incomes consequently lost.

Of the "Kappa Lambda Society," however, the above regulation, now generally notorious, is only one of the features. Its main object was to grasp with an irresistible, though invisible hand, all the lucrative business of the profession, and keep it exclusively within the control of their own body. Additional revenue was to be extorted, not merely from the druggists, in the manner above stated, but by multiplying the frequency and number of consultations, for which, as we see by the above list, every member invited is allowed to charge an additional fee of five dollars. By abridging the duration of these consultations, many may be held in a large city like this, every day in the week, to the no small gain of the worthy "Kappa Lambdas," and the eventual astonishment of the patients or surviving friends who have to foot the bills. It is proper to state that this society is still flourishing in full vigor, and regularly holds its meetings every week.

THE MAGNETIC SYMPTOMS, AND THE PROFESSORS OF THE MEDICAL COLLEGES.

The Professors in our medical colleges have at last been driven to the necessity of teaching the magnetic symptoms to the students of medicine, after they have been long practised by hundreds of physicians, and become familiar to thousands of non-professional persons of both sexes.

Professor Parker, in his clinical lecture, at the old Medical College in this city, on the 24th November, 1845, thus addresses the students, concerning a case of "spinal irritation" (as usual,) in a girl of 17, then before them:—

"Upon examination, you will observe that she complains when pressure is made over any point of the spinal column; indeed, by merely passing the fingers lightly along its course, you perceive how she shrinks from the touch. There is no curvature existing, neither is she at all emaciated. She suffers much from palpitation, and complains of cold hands and feet. The tongue is somewhat furred, and the papillæ are very long and prominent, indicating a high degree of nervous excitation.

"From the history of the case, and from the examination which we have made, we must conclude that there is no disease existing in the spine, but that this irritation is merely sympathetic, depending upon disease existing in some other organ. The girl is evidently affected with dysmenorrhœa, and this irritation is merely sympathetic with that disease. The connexion between the uterus and spinal marrow, is established through the medium of those nerves which are of spinal origin, and indirectly through the filaments derived from the sacral ganglia which inosculate with the anterior branches of the sacral nerves.

"In the treatment of this case, we find that she has experienced but little, if any relief, from the counter irritation which has been employed. The true way is to treat the disease upon which the irritation depends, and when you have removed the cause the effect will cease. Several years ago it was much the fashion to treat all cases of spinal irritation, by friction along the spine with ung. ant. tart., but this practice is now pretty much abandoned."

The treatment, however, which the Professor recommends in this case, is virtually and substantially the same as that which he condemns and declares to be "pretty much abandoned," namely, bathing, friction, flannel, and the application of leeches! The cause of this palpable discrepancy between his doctrine and his practice is very evident. He is still as ignorant of the true treatment and remedies for cases of this kind, as he before was of the true symptoms by which they are indicated and distinguished. Nor is it possible that our medical professors will ever know and teach the only true remedies for *tuberculosis* until they shall have learnt that the cause of this disease, whatever may be its name or variety, is the morbid predominance of the repulsive or expansive force in the system, which can only be counteracted by the introduction of the attractive and contractive force presented in these magnetic remedies.

MAGNETIZED MEDICINES.

It is now more than thirty years since we first commenced magnetizing medicines and we have published during the last ten years more than 25,000 copies of different works in which we have noticed this subject. It has, however, not only been denied, but the idea of magnetizing medicine treated with derision by the professors of our medical colleges and their satellites. Baron Von Reichenbach, of Vienna, has, however, recently succeeded in magnetizing medicines, to the full satisfaction of the great Berzelius, of Stockholm, and of Dr. Gregory, of Edinburgh.

A WORD TO THE WISE.

Physicians of learning and experience know that no dependence can be placed on the old astrological symptoms, by which they have been taught to distinguish tubercular disease, or on the common imbecile remedies for it, as is seen by the following declarations of the distinguished professor M. Lugol, of Paris, to the students of medicine, 1841.

"Tubercles may exist in parenchymatous organs, may even partly annihilate them, without their being revealed by any external symptoms. Our want of success in the use of the ordinary means of diagnosing tubercles, proves that those means are inadequate, that we follow an erroneous course in our investigations, and that we must resort to new modes if we wish to be successful. The numerous checks and repeated deceptions to which physicians are daily exposed in the diagnosis and treatment of tuberculous diseases, do they not prove that it is necessary to leave the beaten track of inquiry and pursue some other which is less fallible?" Few physicians, however, will leave the old lucrative track for a new one—no matter what the consequences may be to their patients.

New York, August 21, 1843.

H. H. SHERWOOD, M. D.

We many years since discovered with the magnetic symptoms, (by which tubercular disease is distinguished in little children, with the same certainty as in adults,) a direct connexion between the posterior spinal nerves, and the ganglionic or sympathetic system of nerves, connected with the organs, which connexion has been constantly denied by the advocates of the ridiculous notion of referring tubercular disease of the organs, to "spi-

mal disease"—"spinal irritation"—"nervous affections of the spine"—"spinal neuralgia," &c., with all their horribly torturing appliances. I also traced this connexion with CLAIRVOYANTS, and Volkmann and Bidder have now traced it with the microscope; and as this connexion is now confirmed by foreign authority, it will be taught in our medical colleges, in connexion with the magnetic symptoms, as soon as the conceited professors of these schools can be replaced by men who have talents and industry to keep pace with the improvements in our profession. The quackery which these professors have practised and disseminated in their lectures, and the amount of suffering they have inflicted upon their patients, while they were literally groaning under the weight of their KNOWLEDGE OF "SPINAL DISEASE"—"SPINAL IRRITATION"—"NERVOUS AFFECTIONS OF THE SPINE"—"SPINAL NEURALGIA," &c., which it is now seen were never favored with a real existence, is absolutely appalling; yet they have the vanity to establish rules of practice, and the bare faced effrontery to denounce every physician who varies from them.

May 1, 1844.

H. H. SHERWOOD, M. D.

In chronic tubercula the fluids which nourish and support the solids of the system, are changed from a healthy to an unhealthy and unnatural state.

The SECRETIONS which are conveyed to the heart are thicker, and the blood is at first thicker, and has always a darker color than natural.

The EXCRETIONS from the stomach, pancreas, liver, intestines, kidneys, and skin, become more or less unhealthy, when generally constipation first, and then diarrhoea, sometimes supervenes.

On commencing the use of the magnetic or magnetized gold pills, the secretions become thinner, and the color of the blood becomes more florid, imparting, in from one to three weeks, a more florid and natural color to the skin. In from one to three weeks the motions of the bowels generally become regular, and in the meantime they should be kept so with the daily use of small doses of medicine, or as long as they are required. The only effects observed from the use of these pills are the gradual disappearance of the disease, and improvement in the general health.

Tubercular disease is propagated from one part of the system to another, is slow in its progress, and necessarily so in its cure; yet children under ten years, and adults who are very susceptible to mesmeric or magnetic influence, generally recover their health very fast under the use of these pills. The time required to cure any given case depends, therefore, not only on the susceptibility to this influence, but upon the stage of the disease, and the progress it has made. One box of the pills, which will last a patient from four to five months, is generally sufficient for a case in the first stage of the disease, and it is sometimes all that is required in cases in the last stage; but these last generally require two or three boxes, and there are a few cases that require three or 4 boxes before the health is entirely re-established.

In cases of disease of the organs in any stage, with great tenderness along the spine, and in cases of distortions of the spine, backwards or forwards, and in white swellings of the joints, a magnetic plaster is applied along the spine, and also over the white swellings.

I have used these remedies 35 years, with a success that justly entitles them to the character of a specific, as they have cured every case in the first stage of the disease, including tubercular consumption, and a great majority of the cases in the last stage.

The specific character of these remedies is now well known to a great number of physicians in the Union, many of whom are now using them in their practice, while others continue to use, by authority, the long acknowledged futile remedies of the schools, and consequently entail upon confiding families an enormous amount of suffering and bereavement.



If a person has tubercular disease requiring these remedies, more or less tenderness will be felt on applying pressure with the thumb on the ganglions of the spinal nerves in the intervertebral spaces along each side of the spine. Any person of common sense can determine this fact. It is no matter whether there are one or more places where tenderness is found, or one or more organs or limbs are diseased, or which organs or limbs are diseased, as the curative process proceeds, under the use of these remedies, in one and all of the organs and limbs at the same time.*

The ganglions of the middle portions of the neck are connected with the muscles of the limbs and body, and the others with the organs, &c.

Physicians who are not well acquainted with these magnetic symptoms, are necessarily entirely ignorant of the proper remedies for them, and consequently should never be allowed to interfere in the treatment.†

Tubercular disease is entailed on a great many families by the frequent changes of temperature, and by the abuse of mercury, the taint or seeds of which is uniformly destroyed by the use of these pills, in a safe and satisfactory manner.

* H. Lebert, M. D., as well as M. Lugol, has recently shown, by microscopical observations in post mortem examinations, that tubercular disease pervades the organs and limbs, and every other part of the system, as shown by the magnetic symptoms. See Muller's Archives, Nos. 2 & 3, 1844. These confirmations, with that of the magnetic machine, gives our magnetic practice a further and most extraordinary triumph over the old astrological practice of the schools.

† Incipient consumption is frequently detected by these symptoms, even before the cough commences, when no time should be lost in commencing the use of these remedies, as their use, or neglect in such cases, is a question of life or death, there being no other remedy for the disease, as is well known to every physician.

May 1, 1845.

H. H. SHERWOOD, M. D.

MISCELLANEOUS RECIPES.

CHRONIC MUCOSIS—Chronic Bronchitis.—Cough and expectoration, but no pain produced by pressure on the intervertebral spaces between the last cervical (7th) and first dorsal vertebræ.

R. Hard Bal. Copa. and Cubebs, \mathfrak{z} iiiiss. Ext. Hyos. \mathfrak{z} ss. Make 100 pills. Dose, 1 pill after breakfast and another after tea.—*Specific.*

HAWKING—with expectoration.—Tubercular disease of the throat.

R. Mag. gold pills, and mag. machine.—*Specific.*

HOOPING-COUGH.—R. Cochineal pulv. 10 grs. Salts Tartar, 30 grs. Sugar, 1 oz. Hot water, half a pint. Mix. Dose, a tea-spoonful three times a-day.—*Specific.*

ULCERATED EARS.—R. Jamaica Spirits, a wine-glass-full. Honey, a tea-spoonful. Mix, and introduce a little into the ulcerated ear morning and evening, with a feather.—*Dr. Van Buren.*—*Specific.* Ulcerations of any other part of the body may be wet with this solution while under the use of the magnetised gold pills.

ASTHMA.—R. Magnetic machine and Hyos. Magnetise as directed in Bronchitis.—*Specific.*

CHOLERA MORBUS.—R. Salts Tartar, Pearl-ash, or Salæratu, 1 tea-spoonful. Water, 1 pint. Dose, a large table-spoonful. Opium, 1 grain, or 30 drops of the tincture, for an adult. The alkaline solution and the opium to be taken every time the patient vomits, and every time he has a motion of the bowels.—*Specific.*

IN CHOLERA INFANTUM, or the Cholera of Infants, there is nothing to be compared to these alkalies and tincture of opium, which should be given in doses proportioned to the age and condition of these patients.* These remedies are also among the most important in ASIATIC CHOLERA.

MAGNETISED GOLD PILL.—A magnetised chemical compound of gold, iodine, and chlorine; an intricate and difficult preparation, and of specific and extraordinary power.

STERILITY is one of the consequences of chronic serosis, or tubercular disease of the uterus, for which the magnetised gold pill is the specific, as is well known to many physicians.

IMPOTENCE.—M. Mazard cured several impotent persons by means of electricity. In these cases, one button (the negative) should be placed over the genital organs, and the other over the hollow of the neck. We have restored twenty-two cases in this way, while under the action of the magnetised gold pills.

TEMPERAMENT.—Magnetising, like mesmerising, produces a change of temperament. Persons who were very insusceptible to mesmeric influence, have become very susceptible to it, from the use of the magnetic machine.

COUGH IN CONSUMPTION, OR IN CHRONIC BRONCHITIS.—R. Tar (hard wood the best), one table-spoonful, Jamaica spirits, half a pint, honey, half a pound. Mix, and shake well, or one hundred times. Dose: a tea-spoonful once, twice, or three times a-day.—*Clairvoyant.*

NAUSEA, or Sickness of the Stomach.—R. Tinct. Ipecac., 3 to 5 drops, in a wine-glass of water; or of first dilution, 5 to 10 drops, in a wine-glass of water.—*Homœopathic.*

ACIDITY OF THE STOMACH.—R. Salts Tartar, Salæratu, or Pearl-ash, 1 tea-spoonful, Water, 1 pint. Dose, a quantity sufficient to neutralize the acidity.

SARSAPARILLA SYRUPS.—The muriate of mercury, or corrosive sublimate, a virulent poison, is the active principle which it is well known is always disguised in these syrups, and often prescribed by the regular quacks of our profession.

* Among the Homœopathic remedies for this disease, causticum and opium are the best, and correspond with these; and are very useful in the diarrhœas and dysenteries, or summer complaints of little children.

GLOSSARY.

- Abscess*, A swelling containing matter.
- Amenorrhœa*, Obstruction of the monthly discharge from the uterus.
- Antrum*, Cavity under the cheek bone
- Auscultation*, Act of distinguishing diseases of the chest with the stethoscope
- Axilla*, Armpit.
- Catamenia*, Monthly discharge from the uterus.
- Cerebrum*, The front and upper part of the brain
- Cerebellum*, The back and lower part of the brain.
- Cervical*, The neck.
- Cervical Vertebrae*, The seven uppermost joints of the spine.
- Chlorosis*, Retention, or suppression of the monthly discharge from the uterus.
- Clavicle*, Collar bone.
- Cranium*, Skull.
- Diagnos*, To discern or distinguish.
- Dorsal*, Back.
- Dorsal Vertebrae*, Joints of the back between the cervical and lumbar vertebrae.
- Excavation*, A hole.
- Excretions*, These are formed by the excreting system, and are conveyed to the surface of the mucous and serous membranes and skin, and then expelled from the body
- Expectoration*, The act of coughing up matter.
- Flaccidity*, Soft and flabby.
- Glands*, Round organized bodies, with vessels, nerves, and connecting substance.
- Ganglia of Glands*, Knobs of, or a line of glands, (kernels.)
- Hemorrhage*, Discharge of blood.
- Hypertrophy*, Swelling.
- Inguinal*, Appertaining to the groin.
- Intestines*, Bowels,
- Lung*, The lungs, (lights.)
- Leucorrhœa*, A discharge from the uterus of a whitish, and sometimes of a yellow or greenish color.
- Muscles*, Distinct portions of flesh of different lengths and forms, with which the body and limbs are moved.
- Marasmus*, Emaciation.
- Menorrhagia*, Excessive monthly discharge from the uterus
- Mesentery*, The caul.
- Oedematous*, A soft inelastic or doughy swelling, which when pressed with the finger retains its mark for sometime.
- Oesophagus*, Gullet.
- Spine*, Bony column of the back, composed of twenty-four bones called vertebrae, seven cervical, twelve dorsal, and five lumbar.
- Stethoscope*, A tube or acoustic instrument to distinguish diseases of the chest by the different sounds in their different stages.
- Secretions*, These are formed by the secreting system, and conveyed from every part of the body to the heart and centre of the circulating system.
- Tonsils*, Glands (almonds of the ears) situated on each side of the throat.
- Tubercle*, Enlarged gland.
- Tibia*, Shin bone.
- Uterus*, Womb
- Uvula*, Palate

INDEX.

	Page.
Action of imperceptible agents, - - - - -	145
Alkalies—acids—chloride—chlorides—bitumen and iron, - - - - -	52
Attractive force contracts, - - - - -	51
Baron Reichenbach's Experiments, - - - - -	176
Case by C. B. Guthrie, M. D., of Granville, Ohio, - - - - -	116
Cases, - - - - -	63 to 124
Causes of the symptoms, - - - - -	45
Cause of the tuberculations, - - - - -	49
Chemical properties of the secretions in health and disease, M. Donne, - - - - -	34
Clairvoyance, - - - - -	150
Clairvoyance—literal sight—intuitions, - - - - -	193
Clairvoyance, specimen of, - - - - -	199
Clairvoyant powers, - - - - -	192
Clairvoyant examinations of diseases, - - - - -	194
Clairvoyant prescriptions, - - - - -	194, 198
Consumption, - - - - -	63 to 70, 141
Credulity of unbelief, - - - - -	174
Directions for using the magnetic remedies, - - - - -	55, 62
Dr. Elliotson, mesmerism, and New York Museum, - - - - -	171
Dr. Forbes on mesmerism, - - - - -	203
Excreting system and motive power of the body, - - - - -	9
Examinations of patients at great distances, - - - - -	196
Fees of physicians - - - - -	215
Galvanic and animal battery, - - - - -	32
Glossary, - - - - -	222
Gold pills, magnetized, magnetizing medicine, - - - - -	118, 176
Great pole and train of small poles, - - - - -	192
Hahnemann on chronic diseases, - - - - -	206
Homœopathy, a case, - - - - -	205
Hunnewell and Swedenborg, - - - - -	144
Impressions or intuitions instead of literal sight, - - - - -	193
Impressionists, - - - - -	193
Important facts in mesmerism, - - - - -	175
Index, - - - - -	231
Influence of magnetism on animals—Dr. Philip, - - - - -	54
Inseparability in magnetic sleep, - - - - -	200
Introduction, - - - - -	5
Iodide of potash, dangers from, - - - - -	135
Kappa Lamdas, - - - - -	216
Light and images of the degrees, - - - - -	190
Limbs, distortion of, - - - - -	211
Living magnetism known to the ancients, - - - - -	211
Magnetism, living, - - - - -	149
Magnetic organization of the human system, - - - - -	149
Magnetic symptoms and professors of the medical colleges - - - - -	150
Magnetized rings, - - - - -	218
Magnetized medicines - - - - -	184
Magnetizing, the process of, - - - - -	218
Medical duodynamics, - - - - -	185
Mesmeric sleep, astounding developments, - - - - -	142
M. Lugol's lectures on scrofula, - - - - -	150
M. Lewis's Memoirs, do. - - - - -	128
M. Lisfranc, do. - - - - -	133
M. Sanson's lecture on caries of the vertebræ - - - - -	133
Motive power, application of, - - - - -	94
Mucous surfaces, diseases of, - - - - -	40
Natural remedies for chronic diseases, - - - - -	143
Nervous affections of the spine—spinal neuralgia, - - - - -	50
Observations on the remedies in different cases, - - - - -	132
	57

	Page.
Paralysis in magnetic sleep,	201
Phrenology—phreno-magnetism,	167
Phrenological Society, London—mesmerism,	170
Physiology—magnetic phenomena,	149
Plato—the magnet and the iron rings,	167
Preface	1
Price of magnetized gold pills, &c., Note,	118
Professor <i>Debryne</i> and the Broussaian School,	134
Professors of medical colleges,	124
Professional aphorisms,	214
Prevision in the magnetic state,	171, 173
Quantity of magnetic forces in matter—Mr. Faraday,	54
Recapitulation	212
Receipts—miscellaneous,	220
Repulsive force expands,	50
Rheumatica tubercula,	122
Rheumatica atrophica,	123
Secreting system and supporting power of the body,	26
Sketches of French Surgery, by an American,	133
Spine, lateral curvatures of,	89, 125, 208, 209
Spine, distortions of,	90, 91, 92, 93, 210
Spine, magnetizing in lateral curvatures,	125, 208, 209
Spinal irritation—spinal disease,	132
St. Cyril, Bishop of Alexandria,	173
Symptoms of chronic diseases,	41
Temples, Pagan, prevision in,	168
Theodoret, Bishop of Cysicus,	168
Tuberculosis, from Muller's Archives,	136
Tubercula of the lungs and other organs,	63
Tubercula of the spine and caries of the vertebræ,	89
Tubercula of the joints and limbs,	101
Tubercular disease of the throat and lungs, Rev. J. B. Cook,	113
Tubercula of the organs and muscles, a case,	115
Tubercular disease of the organs, C. B. Smith,	119
Tubercular disease of the brain,	38, 74, 80, 124
Tubercles of the brain in children,	124
Volkman and Bidder, and the posteriori spinal nerves,	132

NATIONAL LIBRARY OF MEDICINE



NLM 01712374 6