THE ACTION

AND

CLASSIFICATION OF MEDICINES

IN CONNECTION WITH THE

ANATOMY OF TEMPERAMENTS.

By JOHN C. MORGAN, M. D.,

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ACTION AND CLASSIFICATION OF MEDICINE.

A living, organic body, vegetable or animal, healthy or diseased, presents a totality of attributes, conditions and actions; the sum of these is life.

The integrity of life depends upon the integrity of these. Vital power is proportioned to the same. Vital power is co-operative with normal agencies extraneous to it, viz: hygenic agencies. It is antagonistic to abnormal or hostile agencies, (drugs, for example,) the sum of the influence of life being the ordinary conservation of the *status quis*, in the first place; over and above which is the resistance and repair afforded against the effect of hostile agencies whereby these may even be made subservient to the requirements of life, as antagonists to yet other similarly hostile agencies; and besides, when acting alone, such agencies find the living being so fortified in its life status as to offer essential resistance to encroachment without extraordinary excitement. and with promptness and certainty; or otherwise, if the ordinary life status be inadequate, implying a modification of such life elements as have been provided in the original creation for the accomplishment of this purpose, and maintained by the same Creative Wisdom since.

This conservative life status, may, for convenience in discussing the action of drugs, be paraphrased as "power of reaction;" "conservative power;" the effect being, not necessarily the production of opposed conditions pursuant to their initial effect, this being merely and occasional incident of reaction, but simply the restoration, by a more or less circuitious and complex process of the original life status, by the correction of such of its elements as may have been deranged; the mutual influence of the life elements being the proximate source of such restorative action, impairment in any one particular being directly productive, as seen in Plate I., and by simple physiological means of increasing power in those which remains; these having similarity with it in having like grouping.

This is also *per se*, a pathological status with remotely impaired vitality; but under the circumstances, conservative. This is the

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"similar disease" which cures in the form which may exist without medication, as in spontaneous recovery; or it may be induced by drugs, as in homœopathic medication, though the highest similarity operates directly in the diseased region itself.

Plate I exhibits, under the typical form of vascular alterations (an usual concomitant of diseases), a series of phenomena illustrating the effect of hostile action and conservative resistance, particularly in the influence of cell nutrition of any part on vascular contractility in other parts nervously associated with this, with its concomitant influence on the nutrition of the same parts.

This corrective action of nerve currents, proceeding from well nourished parts to others, whose nutrition and vascularity are deranged, will presently be considered.

We next notice that, as just hinted, the maintenance of the life status proximately depends on nutrition of all those material parts, by which life finds expression. To this all vital effort tends. The operation of all those agencies by which life thus exhibits itself, may be summed up in the single technical phrase: "nutritive erethism," expressive of the fact that a degree of organic excitement charactizes the process of nutrition. Normal and equable nutrition is health. Disturbance of the same is disease.

Predominance of "nutritive erethism," in some general sphere, may be regarded as the basis of temperament, which may be a condition of disease, as it diverges from the health line of equable and normal nutrition; its ordinary influence being, however, consistent with an average standard of health; perfect equipoise being indeed a rarity.

Nutritive erethism is itself the product of certain proximate factors, material, dynamic and spiritual. The first includes two elements, the organism and the plasma. The second comprises two elements, force and stimulus. The third consists of that spiritual element which, acknowledged as the essence of soul in man, has been asserted also of other beings, by some, but which clearly differs from all others in him.

Let us review these. The organism is the material structure of cells, tissues and organs, provided for the expression of life phenomena, and to this end, arranged with exact fitness to the local office of each, and also to their perfect co-operation in the vital actions.

The plasma is the material of which cells, etc., are formed,

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becoming thereby an essential factor of "nutritive erethism." Whilst its perfect assimilation is due to vital action, its origin is extraneous to the organism which it is to nourish, so that it holds an inferior relation to it as a source of morbid action—the objective point of our present study.

Force or dynamism is an essential requisite and condition of material action. Adopting the generally acknowledged doctrine, that there is one universal force in nature, the so called forces being but its varied forms, due to the varied media and modes of its expression; it follows that however complex or disguised it may appear in vital phenomena, as germ force, cell force, nerve force, etc., its identity is never lost.

Stimulus is of both material and immaterial sources. It may be defined to be anything which, when applied to the organism, communicates or evokes the manifestation of force. Adopting, as to the former, the new chemical doctrine* that the normal status of matter is not strictly atomic but molecular, the molecules being composed of pairs of atoms, the possession of molecular polarity is a legitimate inference, and molecular affinity or repulsion for tissues and cells, already polarized by resident forces, is a necessary consequence.

Such measured affininity for certain spheres of the body is a constant trait of the action of medicines in addition to their purely physical effects, so-called. Hence we have a reason for seeking to reduce our drugs as nearly as possible to the normal status of matter, extinguishing their massive character in molecular attenuations, which, by liberating dynamic or polarized molecules from the control of each other in cohesion, makes their polar forces, which, as in silex, were before lost in cohesion, manifest in presence of the organism, no longer as cohesive but as molecular force.

The most minute particle yet seen with the microscope is still evidently massive, not molecular, for instance; the 9,000,000,000th of a grain of mercury. The active molecule is vastly more minute.†

Stimuli are either physiological or pathological. The former, if abnormal in degree, become thereby pathological. They include all those agencies which maintain the supply of force required for the purposes of life in the form of light, heat, electricity, motion,

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* See Porter's Chemistry.

† See Wormely on the Micro-Chemistry of poisons.

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etc.; and which, becoming identified with the organism, appear again in the new garb of organic forces. Being largely due to solar and planetary influences, they necessarily obtain thereby the stamp of periodicity of influx and reflux, corresponding with the ever changing relations of the earth to other orbs. The practical bearing of this observation will presently appear.

Pathological stimuli *per se*, are those agents, material or immaterial, organic or inorganic, which, being heterogeneous in quality to the organism or hostile to the normal operation of the organic forces, and so unsuited to normal nutrition, give rise to disturbed nutrition of one or more parts of the organism, with consequent functional lesion and even anatomical change; or which, in other words, provoke the phenomena of irritation by virtue of forces inherent in, or incident to their molecular constitution or condition.*

Drugs are such irritant agents, that in health they are essentially pathogenetic, whereas in disease, their inherent molecular forces, directed by our guiding law to the field of vital contest, supply the deficit of force, or neutralize morbid polarity of cells and tissues, or confer normal polarity by induction; aiding the natural periodic stimuli, probably, in all these ways, in bringing about restoration of normal nutrition, or health.

Spirit has been referred to as a factor of nutritive erethism. It would be manifestly improper here to enter into any lengthy metaphysical discussion. Suffice it to say, that matter, in no case, can of itself perform that high function of intelligent will—obedience to law; a proposition which seems evident. The same may be said of force. Both are in themselves inert. From this it follows that spirit, meaning some combination of intelligence and will, is essential to all material action.

In all inorganic actions, common consent excludes the idea of intrinsic spirituality; therefore its phenomena must be momentarily controlled and directed by extrinsic spirituality, which, by general admission, is the same with that by which it was originally created, namely, Deity.

The same observations may be extended to the lower organized beings without difficulty. Now in this view, vitality is no independent, atheistic essence, but literally every act of circulation, respiration, etc., is an act of Divine interposition, and the laws of nature are simply the self-imposed rule of action of Deity.

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* See Hering's lectures on Hausmann.

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Man, made in His image, is doubtless endowed, in a finite measure, with similar spiritual control over matter and force, as we constantly see illustrated in the phenomena of mesmeric psychology. The mind and will are well known to exert a controlling influence, in not a few cases, in producing or limiting morbid as well as curative actions of the organism and its forces, though constantly reacted upon by these.

How far the next grades of mammalia are similarly endowed, may be a curious inquiry, but the supremacy of man in this respect is evident. It is at the same time clear that only in a limited, a very limited, degree, without direct aid from Deity, can even man exhibit this power. With that aid, miracles become as the routine of nature.

But only in the consciousness of waking moments can will act; yet in sleep, vital action, as in inorganic beings and low organisms, goes on uninterruptedly under the sleepless interposition of Divine will.

We cannot, therefore, either in physical or physiological discussions, atheistically ignore the influence of spirit, as some claim we should do, without violence to the inductive philosophy and the true interests of material science. We cannot but assign it a place as one of the factors of nutritive erethism; and we may state of it, practically, that its agency is at various times exhibited in the way of control, at others in the way of stimulus. When the being parts with this spiritual element of its existence, it is dead.

Disease is the product of disturbance of any one or more of these factors. Deficiency of any of themselves as commonly existing, proportioned excess of any of them, and extraneous stimuli may be proximate causes of disease; this consisting specifically of deranged nutritive erethism, commonly called irritation.

Irritation, in the limited sense now intended, is peculiar to the animal organism, and presents four prominent features, viz: 1. Derangement of nervous function, quantitative, and remotely qualitative. 2. Vascular derangement, especially in the way of altered calibre and stasis of the capillary blood-vessels of the irritated part. 3. Exosmotic disturbance, consequent on capillary derangement, and possibly, somewhat on neuro-dynamic influence, as in diabetes, from irritation of the pneumogastric nerve. 4. Disturbed cell-nutrition or proliferation. 5. Deranged functions. All these are visibly present in nearly all cases, but unfortunately have been

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often separated and partially ignored. Indeed, not all cases present all these in the same degree and proportion.

Notwithstanding the variety of irritative phenomena, there are but three distinct conditions to be noted, viz : 1. Local anæmia. 2. Local hypeærmia. 3. Local inflammation.

The first is characterized by vascular contractions, diminished tissue, proliferation, and diminished exudation, with functional debility. The second is marked by increased vascular calibre, tissue degeneration, exudation and loss of functional power corresponding to impairment of nutrition. Coupled with each are various sympathetic phenomena, as chill, fever and exhaustion.

Contraction of vascular calibre is the first effect of stimulation of any grade, and characterizes the prevailing tendency of mild stimulation; hence the value of homœopathic doses. Hyperæmia, with its concomitants, results from excessive stimulation, debilitating the vessels by over action, the vaso-motor nerves being exhausted in part by over stimulation and response; excessive proliferation progressing up to a similar weakened state of the adjoining tissue nerves. Inflammation has the same in greater degree, but the nerve force being at minimum, degeneration of tissue exceeds proliferation, and removes the excess of tissue formed in hyperæmia, and also some more than that; reaction,* via hyperæmia, causing rẽpair.

All nerves seem to possess two functions, not often discussed in relation to them, viz : vaso-motor and proliferating influence, doubtless due to separate, but adjoining filaments, the nervous system being the depot, as it were, of organic force; hence the great importance of nerve, in the curative efforts of the organism, and the imperative obligation of the physician to conserve and stimulate it in all proper ways.

The proliferating influence is believed to be anterior in its occurrence to the vaso-motor, and Plate I must be studied with that reservation, each group being physiologically headed by nutritive changes. It by no means follows that, as sometimes taught, these cause all the rest. They are rather co-effects of nervous disturbance.†

Drugs are stimuli, heterogenous and pathogenetic, *per se.* They appeal, we conclude, by their innate molecular, polaric

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* Reaction is simply defined to be the totality of the processes of restoration.

†Primary anæmia is marked as having lessened proliferation, but before anæmia be developed, excess of nervous currents must have increased proliferation.

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forces, to the nervous poles of the body, evoking their action by conversion of their own molecular forces, or by induction, and this, without prejudice to their purely physical effects. Large doses inflame, unless by evacuant exudation, the excess is eliminated. Small doses have the opposite effect, speaking comparatively; hence they cure, in diseases similar to those occasioned by such large doses.

But reference has thus far been made alone to the initial region in which excess of stimulus or irritation has been applied. By nervous association, both direct and remote, other and distant regions—the whole body perhaps—may be sympathetically effected, and as the nerve currents of irritation are very complex, and the effects on vascular calibre and nutrition very various, we may be pardoned if we trace, by study of provings and other diseased conditions, the more occult phenomena, by means of a diagram. As large and small doses act diversely, they are separately presented. See Plate I.

From this diagram we may also obtain a conception of the shifting of irritation to distant but sympathizing parts, this being known by the term "metastasis."

It will be observed, next, that in the production of the changes of vascular calibre, from irritation, the low potencies and crude drugs present the greatest initial irritation; whereas the higher show but slight changes in the same region; only causing, in fact, just that grade which developes characteristic symptoms of functional derangement, unmasked by the cruder inflammatory effects of large doses, in which every member of a class may equally partake if the doses be the inflammatory dose, in each case, so that high potency provings, though doing less damage to the organism in the way of anatomical lesion, may well give subjective symptoms, at least of greater purity than those made with massive doses. If the most extreme lesions be desired in proving, of course, the large doses are necessary; both have their value.

Again, it will be noticed that in high potency irritations, hyperæmia is later in occurrence than is seen from the use of larger doses extending to that range which, being next to the period of restored health, we regard as secondary effects. In this, two points come to view, viz: the diverse development of symptoms from high and low doses, and the superior value of remote symptoms in the former and of the early symptoms in the latter case; true similarity involving a like initiation, as well as

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a like catalogue of symptoms, at least as to some general regional impression.

Lastly, we find that with high potency irritation, hyperæmia of distant, sympathizing regions, causing sympathetic and deceptive symptoms, occurs early, subsiding with reaction; whereas, in using low or crude preparations, these are less as a whole, and occur with the process of reaction, after becoming chronic. Hence, early symptoms from large doses; late symptoms from high potencies, are, for a second reason, the purest and most characteristic. In diseases, even high potency medication often excites characteristic symptoms early.

Still regarding the initial irritation as the typical action of a drug or other pathogenetic agent, we perceive that the morbid effect is pre-eminently engorgement of the irritated vessels, with corresponding nutritive changes, causing parallel symptoms, and increasing or diminishing with the doses.

With this variation in the power of different doses to engorge the affected region, experience shows that the power of reaction in the opposite direction from that of the morbid impulse, varies in like proportion, being less as the violence of the initial irritation exceeds the endurance of the vital organism,* and its ability to maintain the health standard, and being greater as the vital abilities exceeds the violence of the irritation; consequently the drug action—primary effect—is most conspicuous after large vital resistance, and reaction after small doses.

Vital power differs with every person, so that a dose, small for one, may be excessive to another, or the same person at another time, and vice versa. Assuming an average, we may say that each drug, or other irritant, presents three distinct points in its posology, viz: 1. The dose which just balances the vital endurance. 2. The dose which over-balances this. 3. The dose which is itself overbalanced by the vital ability.

Allopathy knows only the first two; the third it rejects. Homœopathy regards the first as neutral and useless, and so does allopathy. Homœopathy holds the second to be pathogenetic, not curative. Allopathy holds it to be curative, although indirectly and without specific quality. Homœopathy claims the curative specific quality of the third dose, provided the remedy be the similimum. Allopathy regards this quantity as simply more

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*This vital energy is easily estimated by the general state of nutrition of the body.

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inert than the first. This, being the merest assumption, and a negation at that, may be outweighed by a single fact, if, indeed, it be above contempt. If any one doubts, let him sustain by a syllogism the opposite opinion.

We may illustrate our position by the admission of the other side. The practice of most allopathic physicians affords instances of the use of emetic drugs in small doses, in gastric irritation. Let the well known emetic, ipecacuanha, furnish the example, for it was long ago used, either alone or as an ingredient, in the celebrated "Lady Webster's Dinner Pills"* for dyspepsia, so commonly attended with sickness of stomach.

Now the doses given are comparatively small, and it is plain that the intended effect is just the opposite of that resulting from large doses. Instinctively, this similar remedy is employed in reduced doses, as Dr. Reith, our allopathic contemporary, boldly recommends in the case of aconite, though in the same breath refusing the logical sequence of his own argument.

It follows from the opposite effects of large and small doses, thus illustrated and daily observed, that there is a medium dose which has neither effect; and this is the first of the three quantities before named, to wit: that which just balances the vital endurance and is therefore inert or neutral. It further appears that if we increase the dose above this point, the irritant effect increases.

Again, the allopathist, exceptionally taking a single step in the opposite direction, secures, sometimes, the anti-irritant effect; if not, he inconsistently refuses to proceed, and fails. The homœopathist, going on in the same direction, reduces the quantity again and again, receding farther and farther from the neutral, inert starting point, wherein he is simply and logically consistent, thus succeeding. Experience at the bedside giving practical proof of this, the efficacy of our doses becomes at once a philosophical necessity and established fact.

Continuing the ipecauanha example, we may now, using terms of general significance, say that large doses vomit, small doses arrest vomiting, medium doses have no effect: ergo, the largest doses are the most violent emetic; the smallest doses are most strongly anti-emetic.

A diagram will aid in comprehension of this proposition. See Plate II, figure 1.

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* Sometimes, in our day, the ipecacuanha is significantly omitted.

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The leading reason for this state of facts seems to be that the impression of a drug being heterogeneous or irritant, the vital organism sets up a counter action, or series of actions, for the purpose of resistance and expulsion of the morbid agent. There is no reason to doubt, however, that only by suitable stimuli can this resistance be induced, in natural diseases, the irritant cause having vanished. Hence the stimulus of solar and planetary forces seems essential to spontaneous recovery; medicines being substitutive or supplementary stimuli or force bearers. Without such forces, constantly and intelligently applied, morbid states must be perpetuated under the law of inertia, even if life itself could continue without such intervention. These natural stimuli being, therefore, *per se*, conditions of vitality.

We may conclude then that the primary effect, whatever the stimulus or the dose, is the stimulant or irritant action proper; most marked after large doses; the secondary is the vital response of the organism in the direction of antagonism, *i. e.*, systemic reaction, attempted at the very onset, but best maintained after minute doses, which, however, would seem to be not merely, as in common dead matter, equal to the original action; but also having received vital impulse, must, under the same law, provided no obstacle be encountered, go on in the same direction forever, by mere continuance of the attitude of the parts concerned in reaction, so induced. No such obstacle previously presenting, the organic equipoise or health line is, not without fluctuation, finally reached, and reaction terminates at that barrier. No dose is too small for this, if the agent be really present. Anatomical lesion, if great, may early prove a bar to reaction, demanding repetition of doses, and even crude forms, it may be.

A diagram will aid in the comprehension of this also. See Plate II, figure 2.

Let A be an elastic spring, firmly erected. B, a ball which strikes it from the right, moving it to C. The elasticity of the spring, representing vital power, returns the ball, on cessation of the original impulse, to A, to D, and finally far beyond to E, expelling it from its position entirely, as happens also with the drug. The spring, meanwhile, vibrates to and fro, illustrating periodicity, until at last it stands firmly in its normal place. If the original impulse were slight, quiescence must ensue the sooner and more easily, and although the original medicinal sinister impulse from small doses, indeed be slight, the normal status is reached all the more quickly

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and surely, supposing it were passive before, in natural disease. Hence the infinitesimal or catalytic dose is the true curative quantity of a similar medicine.

The curative nature of a similar irritant, *i. e.*, the homœopathic medicine, seems due to the fact that whereas the morbid agent is, in natural disease, a thing of the past, and, its influence accomplished, reaction towards health goes on under stimulus of solar and planetary dynamism only, and these natural stimuli so fluctuate as to permit, if they do not provoke, periodic aggravations, whilst a genuinely similar drug, whose whole line of initial and sympathetic action is a counterpart of the disease, evokes reaction in advance of aggravation; being a new agent of stimulus, and this hastened reaction being repeated over and over in the periods of amelioration, the cause, as it were, steals a march on our slow-going solar system.* Thus it happens that, especially with large doses, we are most apt to meet primary aggravation from medicines given just before the periods of natural aggravation, *cæteris paribus.*

It remains to be said that the curative power of very large doses of a homœopathic remedy which is sometimes witnessed, especially in the garb of an allopathic receipt, is to be accounted for in one of the following ways, or in the several combined: 1. Great vital endurance. 2. The evacuant effect of some drugs, eliminating the excess of quantity, just less than an evacuant being most persistently irritating, therefore. 3. The antidotal effect of combined or alternated drugs. 4. The imperfection of the similarity. The "just less" above named, is the kind of exception which proves the rule; and "the imperfection of similarity" is to be considered as possessing the negative advantage that large doses act by extension of their effect, by contiguity of tissue, or by connection of nerve fibres, from distinct parts, not by the direct influence of a similimum, of which small doses only can be borne.

We may hence learn that similarity and contrariety are to be considered, not as absolute, but as relative terms; similarity gradually fading from the point of its highest intensity, to indifference and contrariety, or remoteness of action, gradually fading also to the same indifferent medium, constituting an unbroken series of qualities, all the way down from the most intense homœopathy to the most complete allopathy.

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* All medicines may therefore be called "antiperiodics."

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Every physician of whatever school, in all probability range unconsciously, at times, over the whole series, with corresponding good or ill success; the homœopathist having the advantage of the guiding law.

To resume: Whatever the theory of physiology and pathology, cellular or vascular, which may obtain the confidence of the medical profession, all are now agreed that the primary condition of life is nutrition; disease being only an error of the same. Therefore, the question of cell function and vessel function are subordinate, and we may add, these are in reality questions of methods rather than of results, and the dispute is as to the order of events rather than the entity of those events, both being included in normal, both disturbed in abnormal or diseased nutrition; in varied degree and proportion, it is true.

All existing doctrines, except those of homœopathy and chronothermalism, seem to agree in discarding as obsolete, the views reviewed a century ago by Brown, Mesmer, and others, concerning the agency of the forces, and particularly the nervous force, in producing health and disease, though all admit its implication in both normal and abnormal nutrition, to use the modern phrase.*

Indeed, the old, like the new, systematists had little clear conception of this point; hence their transient influence. Science, too, is eclectic; the systematists, old and new, somewhat too partisan. May we not hope, in again calling attention to nerve force, in this connection, to be exempt from their mistake?

In the classification of those agents which we call medicines, we have to bear in mind that they are such by virtue of their molecular pathogenetic forces, that is to say, their capacity of producing, in accordance with certain polaric or dynamic affinities, irritation and abnormal nutrition, somewhere in the body, so changing the totality of its functions and its polaric or dynamic relations as to constitute disease, just as occurs from other non-medicinal factors of the same morbid dynamism.

Such, indeed, is the similarity of both, that we may assert that whether morbid agents be material or immaterial, and whether their means of access to the minutiæ of the organism be alike or

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* Hahnemann, although an opponent of Brown, so far agreed with him as to maintain the dynamic nature of diseases in general, which means the same as the debility of Brown.

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not, their modus operandi is essentially the same; that is dynamic, or by and through force, and may be viewed as a unit.

We may affirm, besides, that so far as this differs in the animal organism from that seen in the vegetable and inorganic creations, all such dynamic actions are effected through the intervention of the nervous system. The phenomena of inception and progress are, in all cases, undeniably characteristic of disturbed forces, whilst they are no less characteristic of nervous disturbance, being commensurate with it, if we consider the vaso-motor and nutritive influence of the nerves.

All changes of the material are, of course, effected through the forces which bear upon it, and the most obvious of those forces which concern the material components of the living body, controlling, modifying or perverting their nutrition, as well as their functions, are clearly referable to the nervous system. Let us consider them and then inquire for their relation to this great dynamic system.

Some will deny the accuracy of the term "forces;" alleging that all ordinary forces are held during life in abeyance to a single principle peculiar to living beings, to wit: the vital principle or life force; and that the only exhibition of the former is seen in the effete matters of nutrition. But without arguing this point, the question may be concluded by reference to the aphorism: "There is but one force in nature; all so-called forces being mere co related forms of this one universal force of nature, differing in accordance with the media of their expression."

Thus, vital force is, after all, no separate entity, but only a mode, or more correctly, a series of modes, of dynamic expression, the medium being a living organism.

With this definition, the word is still useful. The central source of the forces which control all phenomena of the planetary system appears to be the centre of that system, the sun. This is so evident on reflection, as to require no argument, but it is important to limit the statement by the admission that the Divine Spirit first created, and, as neither force nor unintelligent matter has in itself any power to obey law; that He momentarily controls the operation of all force, and that man, as well perhaps as all inferior creatures, possesses not only susceptibility to, but also a finite measure of power to wield the same forces, with and without the intervention of the will; a power conferred by the Creator to employ existing force for certain ends; not a new and overshadowing force, holding the existing forces in check or in abeyance, by supplanting it.

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The sun, therefore, is to be regarded in its relation to us, not of course, as the originator, but the depot of supply of that entity which we term force. The vegetable world receives its emanations directly, and appropriates the same to the purposes of nutrition, etc.; also, alternately, mediately, or indirectly through the earth which supports it, and probably through other planetary bodies more remotely. These are evidently periodic in increase and decrease.

The animal world is influenced in like manner, doubtless by all these, but the peculiar nature of animal organization and life forbid the direct access of solar or planetary force to the minute structures except in an incomplete manner. Another channel of access is necessary, developing and storing up force and conveying it from point to point as required under the inducement of appropriate stimuli, material and immaterial, physical and psychical. This necessity is provided for in the nervous system.

Force, however originated or supplied to the cell structures of a living body, is manifested to us on reaching these by all the phenomena of cell life, and we call it "cell force," and this varies in respect to the fertility of nutritive action, very nearly in the same proportion as the known sources and channels of force remain intact, and in particular those of nerve force.

Since our present inquiry is one concerning mainly the susceptibilities of animal organisms of a high order, the nervous system thus becomes the main point of interest in connection with this subject of force, nutritive force, in both normal and abnormal conditions.

In a word, then, we may regard the nervous system as a complex source and channel of force in addition to the direct agency of planetary and solar force, like to that of the vegetable world. As a source the grey neurine is to be considered, the white being the channel of conduction, and presenting antagonistic centric and excentric poles, each end of every nerve fibre being the one or the other. Grey neurine is not limited to the brain and spinal cord, therefore these are not the sole source of nerve currents.

The whole body is more or less supplied with grey neurine, therefore nerve currents may originate in all parts of the body. Those which arise in the grey neurine of the nerve centres may be distinguished as centric; those arising at the opposite ends or poles of the nerves as excentric. Grey neurine, in both situations,

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constitute ganglionic tissue, and may be conveniently spoken of as centric ganglia and excentric ganglia.

The centric and excentric ganglia, however, are both subject to another division, according to their connection with the organic, the so-called sympathetic, nervous system; and the animal, the cerebro-spinal nervous system. Thus we have four classes of ganglionic nerve tissue, viz: 1, organic centric; 2, animal centric; 3, organic excentric; 4, animal excentric. See Plate III.

The first of these is made up of the chain of ganglia belonging to the great sympathetic nerve, not imbedded in the viscera. The second is made up of the grey matter of the spinal cord, and of its prolongations into the base of the brain, including the corpora striata, thalami optici, tubercula quadrigemina, and in short all the ultimate roots of the nerves of special and general sensation, as well as of motion. The third is made up of the grey neurine of the viscera,* mainly through the terminal ends of the organic nerves, universally are included. The fourth is made up of the grey matter at the extremities of the nerves of animal life, with the nerve filaments themselves and their termini universally; thus including the muscles, organs of general and special sense, the cortical part of the cerebrum and cerebellum and such visceral and vascular spheres as receive spinal filaments.

The arteries and arterial capillaries, as well as the visceral veins are largely in the third sphere; the heart, stomach and the general venous system largely implicate the fourth. Vascular disturbances are thus partially diagnostic, as being arterial or venous, of the affected sphere.

The cortical part of the brain is included with the animal excentric elements rather than the centric, for the following reasons: First, the olfactory surface and retina, as well as other clearly excentric tissue is, in embryonic life, part and parcel with the periphery of the brain. Second, this portion of the brain is, although within the skull, terminal to the spinal nerves, and is analogous with other tissue similarly related. Third, in both physiological and pathological states there is a predominance of intellectual and emotional symptoms, generally conceded to be functional to this region, and running parallel with the other signs of excentric erethism, whenever the latter prevails; whereas, in centric erethism, whatever the similarity of symptoms, the traits

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*The heart affords an important illustration of excentric ganglionic tissue, also the retina.

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of spinal force overshadow or give character to the merely intellectual and emotional manifestations.

The meninges, or enveloping membranes of the spinal centre, or cord, are, however, strictly excentric, as much so as the viscera or the muscular sheaths—a proposition which seems to need no proof—yet explains the need of excentric drugs in inflammation of those tissues and in basilar hydrocephalus.

Ganglionic tissue, now seen to be of general diffusion, requires to be nourished in like manner with any other; hence we derive an interesting reason for the intimate nervous connection of each of the four elements described, with each one of the others; each conferring nutritive force upon each and receiving it in return from each along the same nerve fibres; for, as Leidy insists, it is absurd to assign to any nerve the power to transmit a nerve current but one way, they being passive conductors of currents back and forth, to and fro, as generated for the purpose. Thus two centres may be peripheric to each other.

Hence, too, we derive an explanation of the similarity of symptoms in provings, where there is, it may be, a clear pathological distinction; associated parts or poles being successively and similarly affected. See Plate I.

Whatever the symptomatic differences, these largely relate to the order of developement, together with corresponding class signs in the spheres of periodicity, morale, etc., presently to be explained. And, at the same time, recognizing the converse effects of large and small doses used in proving, we can understand why this same order of development of symptoms differs according as the initial action in one and the same locality shall be crude or refined, generally hyperæmic or anti-hyperæmic, erethistic or sedative; complementary and even opposite effects being sympathetically manifested by all the connected nervous spheres.

This, on the general principle that moderate hyperæmia at one end of a nerve implies a corresponding tonic contraction, muscular and vascular, or even anæmia, spasm, chill, at the other end of the same, and vice versa; temporary transition states witnessing equal engorgement, etc., at times, and an extreme hyperæmia (inflammation) at either pole implies a minor, conservative sympathic hyperæmia at the other; conservative because moderate hyperæmia, causing hyper-nutrition, developes active currents to contract the opposed capillaries, etc.; whereas, inflamation is attended

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with incapacity in this respect.* See Plate I. The effect of mental emotion and will on the vascular system affords an interesting field for study in this connection.

Again, an excentric drug, as ipecacuanha in high potency, anæmic doses, by indirect promotion of distant hyperæmia and proliferation at the centric poles of the nerves concerned, will act as a tonic. And in like manner we may account for the apparently contradictory symptoms of our provings, even in respect to those on which we herein propose to base our classification, viz: morale, periodicity, etc.; for since these vary with the stages of the proving, as well as with the doses, causing both initial and remote effects, one of three things may mar the accuracy of the record. 1. The proper moments for observing such class traits may escape us. 2. The quantity of the doses may be such as to exaggerate some individuality, standing in the way of development of class signs in their characteristic order. 3. The timing of the doses may be unfavorable to the same; each class of the four acting initially in its own class sphere; consecutively or sympathetically, everywhere else to the extent of its nerve connections.

We must also keep in mind the fact that not all apparent periodic aggravations are really such. As for instance, "expectoration only in the morning," under pulsatilla, is not an aggravation at all, but an amelioration from dry cough in the evening, etc.

In pursuance of the same point, we see the impropriety of fixing a uniform dose for provings, any more than for treatment of disease; since, as I have noticed, an individual whose temperament is of the same class with the drug, has most symptoms from moderately large doses; a contrary temperament, most from small and infinitesimal doses; and it is in the latter sort of cases that aggravations, by high potencies, often denied, but real as any others, arise in practice.

Allusion having been made in the preceding paragraph to temperamental classes, it is enough to add that these are based upon the fact, elsewhere hinted at, that within those limits which consist with a state of average health, there exists, in the majority of persons, a preponderant erethism in one or other of the four spheres described; which is the temperamental basis of the individual.

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* The consequent deficit in its nervous influence on associated parts developes the conservative, sympathetic hyperæmia therein. Here we also observe the dependence of vitality on organism.

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This is liable to fluctuations in sickness, from hour to hour, or day to day, each temperament, as before stated, being peculiarly liable to the influence of those agents, material or immaterial, solar, planetary or medicinal, which act specifically in the temperamental sphere; moderate or small and rare doses, primitively, acting healthfully, or sedatively, anæmically; excess causing hyperæmic disease.

The signs of each in health, with the changes in disease, are given hereafter. The ancient classification of temperaments is thus superseded, or perhaps it were better to say, reconstructed on a new foundation.

The classification of medicines is made by the symptoms, so far as known, of moderately large doses, the provings being continued long enough to confirm their class conditions, other drugs being added to the lists, according to analogy of chemical and symptomatic traits. In such provings an artificial diathesis supplants or else exaggerates the natural temperament; the class characteristics being ordinarily clearly marked; changing, however, when reaction sets in, into some co-related sphere requiring an antidote, it may be, of this last class; just as the remedial use of the same remedy may be followed by a like necessity for the same consecutive drug in curing a given case of disease.

Affinities and comparisons among related drugs, differing in class, thus assume great value, and in the use of low potencies, we may even predict the consecutive remedy a day or two in advance, in acute cases.

Before stating the characteristics of the classes, either of temperaments or the casual general states observed in disease, or of the corresponding drugs, the grouping and titles of the last named may be given and accounted for in a general sort of way. Thus:

Class first, the organic centrics, or ganglionics, consists, so far as ascertained, of but two remedies: aconitum and veratrum viride.

Class second, the animal centrics, or spinants, comprise all the narcotics and bitters, so called in allopathy. Nux vomica is a type of the class.

Class third, the organic excentrics, or anti-ganglionics, comprise the common acrids, alkalies, salines and acids, of which pulsatilla is a general type.

Class fourth, the animal excentrics, or anti-spinants, includes a variety, as alcoholic liquors, all the aromatics, the fœtid and pungent substances, the oleo-resins and gum-resins, the anti-spas-

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modics and stimulants of the old school, and all the astringents, vegetable and mineral. Zincum may answer for a type. The third and fourth are allied, chemically, by the vegetable acids of the former and the tannic acid of the latter. In consequence, partly of this alliance, four groups are formed from class third.

Group A, alkalies and alkaline earths; their carbonates and borax. Group B, simple neutral (?) acrid substances. Group C, salines, neutrals, composed of acid and alkaline substances, chemically united. Group D, acids, mineral and vegetable.

It will be yet asked, "by what law is such a division to be made, and how can any given medicine be assigned with diagnostic certainty to its proper place?" The answer is, by three indications: 1. The chemical quality of the substance, and its consequent natural alliances. 2. The pathogenetic record, especially as concerning morale, periodicity and order of development, together with physiognomy, manner, attitude, etc., expressive of the conditions of the general system and harmonizing with the preceding. These, aside from any nosological and pathognomonic traits, as well as from mere subjective disturbances; giving the first place, in short, to those symptoms which point out the medicinal diathesis; and of these, so far as classification is concerned, to the generalities which all the co-members of each class possess in common. 3. Experience of the action of the given medicine in disease, by all schools, and the alliances thus ascertained.

In illustration of the first rule, the chemical, all known oleo-resins are members of a therapeutic class, long recognized as possessing in common, certain qualities as medicines. All oleo-resins are thus seen to belong to this medicinal group. The second rule is brought into play when we consider the primitive anatomical sphere of action of all these oleo-resinous drugs as well as their congeners, the gum-resins, viz: in the excentric element of the animal nervous system, shown by all grades of sentient and motor derangement, from paralysis to spasm and neuralgia; and cerebral disturbance, from stupefacation to craziness; visceral lesion being at minimum, sentient and muscular disturbances maximum. The third rule, the experience *ex usu in morbis*, by which all these drugs have been recognized from ancient times as suited to "nervous diseases," and hence termed "anti-spasmodics;" which name, however, falls far short of expressing their individual homœopathic uses.

By the 2d and 3d rules, the "mineral astringents" are classed

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with the oleo-resins and gum-resins; and naturally, the "vegetable astringents," all containing tannic acid, go with these, though bordering on another class, containing other organic acids.

Nature, indeed, abhors the trammels of any absolute lines of classification and distinction. So, it may be as difficult, at times, to say absolutely where a drug belongs, as to declare whether a very low animal is not, after all, more a vegetable in its qualities.

Finally, the volatile nature of the oleo-resins, coupled with their stimulant quality, associates with them other substances similarly endowed, viz: the aromatics, the alcoholic substances, and the ethers. All these, then, mainly and primitively affect the peripheric or terminal, excentric portion, or the "excentric poles" of the animal nerves.

The fourth class, above described, being composed of apparently diverse elements, illustrates the rest, but the others may be briefly touched upon also. Thus, most of the first and second classes depend on an alkaloid active principle. But this is a decidedly less distinctive point for them than is their pathogenetic record—particularly in separating these two centric classes from each other. Thus, the first class, as aconite, clearly affect the organic tissues most; whereas, the second class (instance, nux vomica) as clearly bear most on the animal organism, together with such viscera as are freely supplied by nerves of animal life, as the liver, stomach, etc. Further, none of these cause any local change of importance in either viscera, muscles, or organs of sense, when applied to their tissues directly—yet how marked is their indirect effect! Only through the nerves which supply them, can this be brought about! Therefore, the inference by exclusion is, that their initial action is in the corresponding nerve-centres. Learning, now, from their pathogeneses, what else they have in common, especially as to diathetic generalities, we may, in studying any new remedy, on finding like traits strongly marked in the proving, by moderate doses, slowly and long taken—the typical posology for purposes of class diagnosis—we may at once assign it to the same class; as has been done with certain of the "New Remedies." But it must be kept in mind that the primitive action is, conformably to Hahnemann, the typical one for classification; and besides, that the primitive effect of an infinitesimal dose resembles, measurably, the consecutive effect of a large one. Therefore, undue haste in determining the class of a drug, alone from provings, should be cautiously avoided.

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The two grand centres present distinctive distributions; and in these, the several sorts of blood and lymphatic vessels take part. Thus, the organic affects the arteries, arterial capillaries, and largely the valveless visceral veins, portal, cerebral, etc., the animal centre controlling the venous capillaries and heart, in part; all of which become deranged in concert with the corresponding nerves. So little is known of the lymphatic system, that we cannot say much about those vessels, but may draw inferences from provings, etc., hereafter.

Again, some drugs are compounded of bodies of diverse character, not chemically combined, and belonging to different classes. Thus, china, belonging mainly to the second class, contains also tannic acid as an active component. Even when chemically combined, such distinct powers may co-exist in the physiological effect, as in sulphate of quinine, the sulphuric acid, as well as the alkaloid, quinia, being active.

Lastly, the third class presents certain peculiarities. Thus, it is divided into four sub-classes, or groups; A, alkalies; B, common acrids; C, salines; and D, acids; naming them as they approach, in dynamic qualities, the succeeding or fourth class, and as the class distinctions grow fainter.

The common acrids are mostly chemically neutral, pulsatilla being a good example. A few, as ipecacuanha and veratrum album, containining some portion of alkaloid active matter, unlike, however, those of the narcotics, resemble, somewhat, in properties and indications, the alkaline group, especially in the watery or milky complexion, etc. On the other hand, some, as rheum, containing tannic acid, are allied to the acids also, suggested, like them, by the presence of a tough and even swarthy skin. In the latter alliance, we also find such combustible bodies as phosphorus and sulphur; whilst in the alkaline alliance, the supporters of combustion, or "halogens," are found; the oxygen of all the alkalies and alkaline earths giving them, apparently, this characteristic alliance, their metals being less potential in this respect than those which retain oxygen with less tenacity. These last, indeed, belong mainly to a distinct class, the fourth; mercurius vivus, though a member of the third class, yet is like the fourth; mercurius corrosivus, like the alkalies and halogens, though of similar local effects; mercurius solubilis stands between; such medicines as sepia, carbo veg. and carbo animalis, are severally classed with those of inorganic source, with which they are allied, viz: natr. m.,

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kali carb. and calc. phos., which are also constituents of their media of life.

I have thought that the distinctive complexions, tough and delicate, of persons respectively suited by the acids and alkalies, might be attributed without violence to their diverse external or internal erethism; the drugs severally exhibiting their elective galvanic affinity for and effect on external or internal tissues, predominantly; just as the plates of a galvanic battery eliminate acid matters from one, and alkalies from the other, side. The skin corresponds with the former, and is apparently tough in proportion to its activity; the mucous membranes with the latter, as to both their natural secretions and their drug affinities. The successive intermediate layers of tissue probably hold like relations.

The salines stand midway between acids and alkalies, combining their effects in various particulars, and, like the acids, are feebly distinguished in some points, as periodicity, from class four. All these, with their chemical relatives, are the so-called "antipsorics," implying that "psora" is really a galvanic aberration, affecting opposed surfaces. The combustibles, as phosphorus and sulphur, range with the acids, though in an inferior degree; being allied to class four, also, by this circumstance.

It cannot be too often repeated, that from the continued use of any drug of a given class, especially in high potencies, these generalities are subject to be converted from one class to another, antagonistic to it; hence, after experience in class-symptoms, the physician may often predict the class, and even the remedy itself, which he will next have to employ; always allowing for the tendencies of the individual constitution. And so familiar do class-symptoms become by study and observation, that often, even without asking a question, by the eye, taking in the objective points which mark the class, one may decide *a priori*, to dismiss from consideration three-fourths of our voluminous Materia Medica.

It is a plan not to be despised by the less expert, first to select that remedy in each of the four classes, which in that seems most similar, and forthwith, by the signs hereafter given, select that one of the four which possesses the class traits. If these were indistinguishable, the "keynotes" or "characteristics" would be decisive. Indeed, in some cases, the force of the latter, if known, may overbear that of the class-symptoms, though it remains true, that in nearly all instances, the class-signs must, sooner or later in the

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treatment of the case, be respected, and the earlier the better. And this is true, regardless of the name of the disease, or the number of remedies which may be supposed to act specifically on the organ most palpably concerned, all of which is important, yet not decisive alone. Even conflicts among "characteristics" may often be settled by class-signs, when the latter are strongly pronounced.

The alternation of remedies *a priori*, is thus avoidable, though, if practiced at all, there exists no scientific reason which can be alleged in its defense, if it be not in the way of a combination of the diathetic with the pathological indications; each being represented by a particular remedy. Nature has, however, furnished so many such combinations, ready to hand, that this method seems, to say the least, a superfluity.

The next question is the following: How may the class-signs be recognized in the several cases requiring such diagnosis, viz: first, in the temperamental traits of healthy persons; second, in the temperamental traits, or casual changes, of diseased persons; and third, in the materia medica? The answer is distinct for each of the four classes. The initial sphere of action is meant, as concerning drug-provings; the symptoms of this sphere being characteristic.

Before discussing each of the four classes in detail, it is proper that the fact should be noted, that both of the centric classes have certain points in common, distinguishing them from the two excentric classes, which are, in like manner, marked by resemblances to each other, as well as common diversities from the two centric classes. These traits are, in the centrics of an executive in the excentrics, of a subservient quality; the sense of these terms being equivalent to "impressive" and "impressible," as hereafter employed.

Common signs of both Centric Temperaments.—In both, there is a *keen, clear eye*, a decided physiognomy and manner, and an amount of vital resistance, and personal potentiality, which does not obtain in any excentric type; which is susceptible of increase by cultivation in any person; or, on the other hand, decrease by neglect and sensual indulgence; thus becoming abundant and indomitable, in times of trial, when courageously borne to the acme of success; and again, when otherwise conditioned, dwindling to enervation and dejection, or even to obliteration, more or less rapidly and completely according to its original predominance and intensity.

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The whole physiognomy and bearing of both of these, is possitive and impressive, however modified by combination with other elements, affording to the experts an instant criterion. Towards their own organization, as well as towards their fellow-men, they maintain a positive magnetism of will.

General Distinctions.—The ganglionic temperament, or diathesis, as a casual morbid alteration may be termed, has an aspect, however, denoting instinctive and incisive impetuosity. The spinal (Class II) has rather the character of wary calculation—self-poise—carefulness. It may not be out of place to instance General Sherman under the first, Mr. Seward under the second type.

Comparative General Resumé.—Both are marked characters in social life. Both alike move on persistently towards the goal of desire, with a single eye and fixedness of purpose, concentrating their powers to the attainment, unrelentingly. The ganglionic reaches the end by sheer force, with such wisdom as may be at hand to aid; the spinal, by systematic and wary pursuit of preconceived plans. Both are *rulers* of mankind. In sickness, both have great tenacity of life, and powers of reaction. Wounds heal readily and remarkably, the first do best in case of compound fracture, as from gunshot, whilst the second better endure injuries of the viscera.

Thus, in one of class first, gunshot wound of the lung was well nigh fatal, whereas in an identical case in the same military hospital, occurring in class second, the man was able, within a few days, to sit up and wash his own wound. And among a variety of cases of gunshot fracture of the femur in the same establishment, not amputated, a favorable progress was observed exceptionally in the only individual of them all, belonging to class first, all the fractures in the ward being amongst Confederate soldiers; the one referred to giving constant evidence of his physiological class by imperious anxiety, restless self-attention, and overbearing will.

In some cases, however, in persons of disciplined character, aided by the influence of the third sphere, as shown by a tendency to fatness, these manifestations give place to stoicism, which is an alternative trait, as illustrated in a German officer from Illinois, after amputation for gunshot fracture, who was well, besides, almost immediately.

Whilst anxious concern, or else stoicism, marks the first class, the second shows repulsive ill-humor, or else self-retirement, in

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sickness. No real "vacillation" is seen in either. That which indicates nux vomica of the second class, is rather a result of conflict between a willful determination, and the superior claims which demand a contrary course; whereas a real vacillation is an excentric sign, and is the fruit of insufficiency of will; a distinction which ought to be more generally made.

In both centric types, the predominant periodic erethism occurs between midnight and noon, though the admixture of excentric elements in the constitution, sometimes masks the fact by minor erethism in other parts of the twenty-four hours, as in the afternoon symptoms of aconite, of the first, and belladonna, of the second class.

Again we note a distinction between classes one and two; the erethism of the former, the ganglionic, being mainly between 12 and 3 o'clock at night, and from 9 to 12 in the daytime; whereas that of class two, the spinal, occurs mainly between 3 and 9 A. M.

Finally, if two men, respectively of classes one and two, enter into any business together; the former becomes at once the leader of enterprises; the latter, the manager of them. Both may still be used by others; the first by seconding, or appearing to second his blows; the last, by furthering, or appearing to further his schemes. Both, however, victimize persons of the other two classes, with facility, when unrestrained by principle or otherwise.

General Likeness of Excentric Types.—Both class three and four are in common characterized by a strong line of distinction from the two centric classes—*i. e.*, whereas the centrics are characteristically impressive, the excentrics are decidedly impressible.

General Distinctions between Classes III and IV.—They differ from one another, however, markedly, in that, whilst the organic excentric, anti-ganglionic, or third class, have the quality of inertia, the animal excentric, anti-spinal, or fourth class, exhibit sympathy and sensibility as a prevalent condition. Mingled, as they usually are, proportionally, these modify each other.

The four classes may here be briefly compared, thus, the first, with the Northern mountaineer, who pursues the agile game from crag to crag, with a singleness and fixity of purpose which insures success, and overcomes all obstacles; the second, with the careful merchant who plans the purchase and sale of the product of the chase, and of the merchandize required in return by the hunter;

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the third, with the sluggish peasant who serves the merchant contentedly for the sake of food and raiment and shelter, growing fat in his vegetative servitude; the fourth, with the children of the same merchant, taught in the schools, charmed by the attractions of society, or by those of learning or art; and despising alike, the hardy life of the hunter, the mean selfishness of trade, and the stolid vegetation of the servitor; a source of anxiety and apprehension, yet of pride, to their careful and shrewd parent; draining his purse, and enlivening his house.

Or, again, the first class rules the North; the second rules the South; the third is the phlegmatic white drudge; the fourth the gay black one. Or, to use the very incorrect mythological phrases, the first is the sanguine; the second, the bilious; the third, the lymphatic; the fourth, the nervous temperament. These, compounded, form secondary types, as the bilious and lymphatic, forming the melancholic, so-called, etc.

Special localizations occurring, constitute "habits;" usually concerning most the excentric elements. Thus, the cortical part of the brain being habitually erethistic, in undue proportion to other parts of the same class-sphere, the "encephalic habit" results. If the liver, the "hepatic habit;" better called the "bilious," only for the danger of confusion. If the muscular system, the "muscular habit." If the genital system, the "hysterical habit."

Localized erethism, or even a tendency to actual local inflammations, it may be, will characterize these conditions, all being discernible by application of the ordinary laws of diagnosis.

Finally, the symptoms of morbid erethism, in the sphere of class one, is comparable with a blow-pipe flame; class two, with that of a kerosene lamp; class three, with the smouldering of "punk;" class four, with the flashing and sputter of nitre-paper.

It should be here remarked, that the above statement of the supremacy of the laws of diagnosis, is the proper answer to the query, as to why we assign to certain anatomical (nervous) spheres, the generation of typhical temperamental peculiarities, reducible to four distinct classes, together with the like assignment of all medicinal actions to the same spheres, under the same classes. This has already been discussed, yet, here again, and once for all, it may be said that as the functions of nearly every minute part of the human organism are now well ascertained; normal or abnormal erethism, however caused, in any or all, is thereby easily mapped

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out and located, and its precise character diagnosticated. Therefore, the diagnostic study of man, healthy; or from idiopathic or medicinal causes, unhealthy, affords, as we think, a satisfactory solution to the problem; and so far as concerns the action of drugs, the chemical and pathogenetic records of our materia medica become the woof of the fabric, whose web is anatomy and physiology.

Whilst undue prolixity in such a discussion is to be deprecated, still, the practical utility of the proposed classification depends so intimately upon a clear view of the diagnostic points by which the classes may be promptly known, that the mere allusion to this will, it is hoped, justify a still greater minuteness of description. To this end, each class will now be reconsidered, *seriatim*.

Class I. Ganglionics; Organic Centrics.—The signs of erethism predominating in this sphere, are the following: Morale: positive, unswerving, uncompromising, direct and persistent—or, in profound organic irritation, we see apathetic or stoical fortitude, or else imperiousness, anxiety, and concern; irascible, even sarcastic in manner, or else very cold; independent, unsympathetic, (except in compound with class four), harsh, self-confident, impetuous, cheerful, energetic and untiring, impatient, prompt of action, and opinionated. Rarely and exceptionally insipid, and shrinkingly repulsive, self-saving, and indifferent to the feelings of others, except from policy—a sort of *noli me tangere*. They are, in attitude, stiff or politic; in gait, determined and positive, or apathetically deliberate and cool. Physiognomy: choleric, occasionally "magnetic," or else unimpassioned and even cynical; if perverted, insensible and cruel. Complexion: florid,* or else very pale, rarely brunette, and depending on the associated excentric elements. Gestures: rigid in men, prim in women. Tone of voice: authoritative, or "cheery," or else very reserved. Muscular movements: quick, or else automatically deliberate. Under pain: frantic, concerned, anxious, or else stoical. Appetite and functions: regular, tonic, automatic, instinctive; organic functions most marked. Periodicity of erethism: between the hours of nine and twelve, possibly extending to three o'clock in the daytime; also at night, during the same hours; especially twelve to three o'clock. When sick, visceral diseases predominate, and are either sthenic, or intensely "pernicious," *i. e.* "congestive". The impatience

* This redness differs from that of class four, in being more circumscribed, and lighter.

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becomes very marked, or it is suppressed by discipline into stoicism; or by the "pernicious" tendency, into apathy. Usually, he chafes, is headstrong, and greatly distressed, anxious, hot, and delirious, it may be, after midnight. Occasionally, instead, the alternative condition, reptile-like inertia, and colliquative, congestive depression, or even coma.

No one can fail to recognize aconite as a type of the class of medicines showing their primitive effects in this sphere, and bearing the same names, viz: organic centrics, ganglionics—Class I.

Class II.—Spinants—Animal Centrics.—The signs of erethism in the spinal centres are frequently, yet not always, found in the so-called "bilious temperament." The prevailing point is self-poise! Keen, calm, conscious of reserved power—such an one is steady and persistent in pursuit of any aim, though quite equal to patient waiting on occasion; essentially a manager and controller; prudent, judicious, self-reliant; a strong believer in "common sense;" not easily diverted from the beaten track of experience and of self-interest. If perverted, monstrously selfish and unscrupulous, using for base purposes the power and ascendency which he readily gains over the sympathetic, the aspiring, the unwary; and unrelenting, but cool in revenge. Manner, positive, yet self-poised and quiet; not stiff. In undisciplined persons, sometimes, a dull, almost stolid gravity prevails. Attitude, attentive and wary. Features, under steady control. Complexion, variably tinted with the associated eccentric elements, and not characteristic, being pallid, florid, or swarthy. Gestures, decided. Tone of voice, resolute, steady. Muscular movements, firm, deliberate and rhythmic. Under pain, steadiness and fortitude, sometimes doggedness. Periodicity of erethism, 3 to 9 o'clock, A. M.—usually not sleeping much towards daylight. Appetite and functions, regular and tonic.

When sick, obstinate and surly, rather than headstrong. Motions resolute, whether hasty or deliberate. Suffering makes him angry or dogged, or the self-poised mood of health may remain little changed. The aggravation of the pathological processes is mainly early in the morning.

Class III.—Anti-Ganglionics—Organic Excentrics.—Physically, extremely susceptible; mentally impressible, but not responsive; inert and yielding; often indifferent to danger and difficulty, but readily succumbing; tender, but not sympathetic,

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(except by admixture of class IV) content to vegetate in any easy lot. Prone to embonpoint; not very firm of fibre. Very prone to organic lesions, which have here their principal domain. It is pre-eminently subject to chronic taints, and to insidious, rather than open to disease; and has feeble vital reaction.* Physiognomy and manners, insipid, but sometimes gay. Muscular motions, sluggish, deficient in force. Attitude, indolent. Gait, gesture and tone of voice, indolent and easy. Complexion, translucent or muddy, according to galvanic (?) predominance, internal or external; (the former suggesting the *alkalies;* the latter, the *acids;* the medium skin, the *salines.*) Periodicity of erethism, most marked and typical, from noon to midnight; (less accurately in case for salines and acids,) especially the first part of the night, as shown by imperfect sleep, etc., etc. Such are the typical traits of class III. But rarely, indeed, can these be found so predominant in a human subject, as to quite overshadow other and higher qualities, especially if there have been opportunity of culture. Truth to say, mixture of all four of the qualities, to some extent, is the rule; the contrary, very exceptional, is in fact, a sign of disease. The perfection of such combination, often too little valued, is happily illustrated in the persons of George Washington and U. S. Grant. The commingling is, however, usually observed in infinite diversities of proportion and intensity.

Class IV. — Anti-Spinants—Animal Excentrics. — Anatomically somewhat mixed with the tissues of class III, in the organs, and nervously connected with the spinal centres. This sphere may be said to stand anatomically, as it does systematically, between class II and class III; resembling both, yet diverse from both. Its whole quality is such that with justice, it might be called the "Sympathetic Temperament."

It is essentially receptive of, and responsive to all impressions, physical and psychological. It includes, besides all the organs of sense, the muscles of animal life and the intervertebral ganglia; also, the so-called phrenological organs, of intellect, imagination and emotion, and is therefore eminently related to the spiritual nature of man. To these may be added, *partially*, the venous system, the heart, etc. It is illustrated in the walks of literature and art; but like the third class, finds no congeniality in fields of conflict, either material or spiritual. But withal, under the spur

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* Medication must therefore be the more persistently pushed.

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of provocation, is spiteful and passionate; and for the vindication of a sentiment or idea, is capable of being led to great deeds; but unless combined with a strong centric element, unfitted to lead; being wanting, not perhaps in self-conceit, but in self-sufficiency; in steady continuance in a given line of action, and in self-dependence; losing sight, it may be, of the end, in preoccupation with the means of its attainment. If in a military man, grand reviews will be preferred to battles, and pomp to the dusty march.

It is specially liable to enthusiasm, even to error; yet is the antagonist of the purely selfish and monopolistic centric forces in man. It is that which binds together the social elements, poetic and true, if the cause be right, and the principle sound, but drivelling and rash when in the wrong. Pain appeals not in vain to it, and is exquisitely felt. Danger is fully appreciated, and greatly feared, unless curiosity, anger, pride, duty or affection hold a stronger influence—when enthusiasm overcomes the fear, and inspires, even to daring.

Interest, so powerful a motive with the first two (centric) temperaments, is here of a power altogether inferior to feeling and thought, which supersede dollars, houses and lands; though fame, power and place, with the appendages of wealth, are highly prized. It is tender and susceptible, readily yielding to the demands of taste, passion, friendship or affection; is subject to deception; liable to vacillation, to rashness and impatience; may be selfish, but is usually generous, somewhat prodigal; varies between gaiety and irascibility or melancholy; is, in short, when unbalanced by centric influence, sensuous, sensational, erratic and infirm, or fanatical and visionary.

The manners may be cheerful, kind and courteous; or if the feelings be ruffled, sad and despairing, or morose, spiteful and rude. Moodiness may rule the temper, and inspire the pen. The poets, Cowper and Byron, may serve as extreme illustrations; also, the many persons whom one meets, usually called "nervous." This temperament, indeed, is very nearly that which goes by that name.

It is, as it were, the basis of human qualities; having the other elements developed about it by circumstances, external as well as internal. Like all the rest, it may be either stimulated or held in check by will and education.

The attitudes, the gait, the gestures, the physiognomy, the tone of voice—all plainly declare the traits here stated. The facial

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complexion is, normally, finely and universally crimsoned; but certain localizations ("habits," aforesaid) and certain climates (as the tropics), and also certain modes of life, greatly affect and modify this. The organs and tissues of the sphere are of course active; the senses are quick; the eye is bright, meaning, restless; the features mobile and expressive; blushing readily occurs (in youth); the manners are sprightly. In sickness, languor and indolence, or great excitability and restlessness, change or exaggerate all these signs. Illustrated by *gelseminum* and *coffea*.

Partly for the sake of contrast, the two excentric temperaments may here be be considered together more at length, as has already been done with the two centrics. Both excentric types of erethism and temperament being characterized in common by impressibility, as already shown, we repeat that they yet differ essentially in the fact that the organic type tends to inertia, whilst the animal is marked by sympathy and sensitiveness. The former bears repeated doses of medicine with ease; the latter is easily wrought up, even by high potencies, to violent aggravations, with febrile or nervous symptoms; especially if the medicine be foreign to this class. In the organic, the skin is comparatively flabby—varying in color with the "galvanic" relation of inner and outer parts; darker and tougher when the skin is predominantly active; delicate, if the mucous membranes. In the anti-spinal, however, it is either fine and crimson, or more dense and brunette, or even leaden. The eye may in both be alike in softness; but in the anti-ganglionic, rather immobile; whereas, in the anti-spinal, it is inclined to flash. The former is captivated by "creature-comfort;" the latter, by sentiment, feeling, thought. In both, the morale corresponds with these external and social characteristics.

Thus the anti-ganglionic tends to apathy, sadness, hopelessness, inertia—or else to the cool boldness of non-appreciation. The whole vital voice is organic. Disease here takes close hold of tissue; vital resistance is slight; anatomical lesion is set up (this being, indeed, its great sphere) very soon, close upon the heels, as it were, of functional derangement, or rather, coincidently with it.

On the other hand, the anti-spinal, whilst easily receiving impressions, is speedily roused to active response, and develops a keen appreciation of all influences, agreeable or otherwise; and is of changeable morale. Violent diseases may occur, in which, sometimes, the keenest pains are suffered; but withal, they do not equal, in shock to the vitality, and gravity of symptoms, similar

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conditions in the other sphere, with which, however, it is, we may again say, anatomically combined by contiguity; yet only a few of the worst cases in the anti-ganglionic sphere, equal the anti-spinal in external demonstrativeness, under pain.

Extreme erethism in the anti-ganglionic sphere is commonly marked by utter prostration in the anti-spinal, by spasm, paraly. sis or coma. In meningitis,* with effusion, the same may obtain in the former, also, combined with the proper class-signs; but in the latter, languor occurs, in lieu of real prostration.

The periodicity of the anti-ganglonic sphere has already been stated. That of the anti-spinal, or animal excentric, is most varied and composite, as though made up of the periodicities of the other spheres; the most typical being compounded of morning and evening erethism, or any other two daily periods. Thus, the increase of erethism, marked by disturbed sleep, or uneasiness of some kind, may occur in the afternoon and evening, or, evening and midnight, or midnight and morning, or morning and forenoon, or forenoon and afternoon, or morning and evening, or all day† only, or all night† only; and yet other combinations.

In grave anatomical lesions, which involve all the four spheres more or less prominently, these periods, which seem to show the vital resistance, are in great measure suppressed, until restoration and convalescence begin.

Sometimes, even when clearly marked, it is impossible, owing to the influence of conventionality, to elicit from an individual, any evidence of the real periodicity, morale, etc., except after the most rigid cross-questioning and explanation. Even then it is not always possible. In this, and all similar emergencies, we have to rely on other class-signs, as physiognomy, manners and complexion, as well as the "keynotes," or "characteristics," "totalities;" using any and all the means at hand for the proper selection.

In sickness, as already stated, persons belonging to this fourth class, will usually present a restless eye, nervous mobility, exquisite sensibility to pain, solicitude about their surroundings; or general feverish languor, with flushed face, suffused eyes, drowsiness and quiescence, or else irregular muscular motions. For such a state, attending a febrile or inflammatory affection, aconite could not but do mischief. Gelseminum would be probably curative.

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* The cerebro-spinal meninges largely involve class III.

† These are sometimes simulated by the third class.

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In selecting drugs of the fourth class for persons of delicate skin, it is important to remember that the mineral drugs are very prone to act unpleasantly, the organic substances being milder in effect.

Certain symptoms, as before remarked, may prove deceptive as indices of aggravation. Besides the illustrations heretofore given of this, the paroxysm of ague, is a decided instance. Thus, the real exacerbation of the total derangement of the organism may correspond with class III, yet the paroxysm may begin early in the morning, the general state being more marked by vital activity than in its absence at evening. Then, the paroxysm being only a part of the totality of symptoms, ranks lower than the so called collateral, and especially the apyrexial symptoms. In other cases, a real fever may be an amelioration, from a prior deficient reaction of congestive fever, as it is called. But, when the paroxysm and all other symptoms have coincident aggravation, the duty of prescribing becomes much simpler. Still, let it be borne in mind, that a really conservative action of the system may be mistaken for a genuine aggravation, and so mislead in the choice of a remedy.

Again, real indications may seem to conflict. Here, as in all things, we have to balance and decide between conflicting claims.

Lastly, early in acute diseases, class-signs may be undeveloped. Here, the cause and the usual temperament will be guides.

The excentric spheres afford occular illustration of the anatomical basis of this classification.

Thus a nail lodged amongst the termini of the spinal nerves in the foot, has caused neuralgia or tetanus, or paralysis, amenable, early at least, to hypericum, of the fourth class; here acting in its own class sphere. Or, the papillary structure of the skin (anti-spinal tissue) is inflamed, as shown by a lens; forming an itching papular eruption. Denuded by scratching, it oozes a plastic, sticky fluid. Graphites, of the fourth class, is the remedy acting primitively on this same anti-spinal tissue, or papillary structure.

Again, an eruption, viewed by a lens, is seen to be located in inflamed sebaceous follicles, secreting tissues of organic life; and probably, sulphur cures. Later, however, the nerve-centres becoming involved, or the other excentric sphere, with which it is contiguous, being attacked, other remedies of the like new class may be required. The same may supplement the first remedy, when, under it, the cure remains incomplete.

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The contiguity of the two excentric elements, just alluded to, and heretofore stated, is a most interesting and significant fact for the reflection of the physician. Whilst some may contend that it affords a scientific reason for alternation of medicines of two separate classes, and whilst all will see the occasional need of supplementing one with the other, it affords the strongest of reasons for the renunciation of a purely nosological or even histological choice of remedies, regardless of individual peculiarities of class and group, etc.; however useful these indices undoubtedly are in their proper place.

The presence of both excentric elements in any tissue, is to be understood as major and minor, by the anatomical predominances of each, known to every physician, and varying in the organs of animal and vegetative life, respectively.

Classification of Medicines.

Class I.

"Ganglionics," "Organic centrics," "Aconitum type," comprises the so-called "benumbing neurotics" of allopathy, viz:

Aconitum napellus.
Veratrum viride.

Class II.

"Spinants," "Animal centrics," "Nux vomica type," comprises the so-called "narcotics" and "bitters" of allopathy, viz:

Aethusa cynapium.
Agaricus.
Aletris.
Arnica.
Belladonna.
Barberis vulgaris.†
Canabis sativa.
Cedron.(?)
Chamomilla.*
China.*
Cicuta virosa.
Cocculus.
Conium.
Cornus florida.*
Digitalis.
Drosera.
Dulcamara.
Eupatorium perfoliatum.*
Helonias.
Hydrastis canandensis.†
Hydrocyanic acid.
Hyoscyamus.

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* Allied to class IV, by the presence of volatile oil or tannic acid, in large amount.
† Allied to class IV.

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Ignatia.
Kalmia.
Lachesis.
Laurocerasus.
Lobelia inflata.
Nux vomica.
Opium.
Quassia.
Rhus tox; and rad.
Secale.
Spigelia.
Stramonium.
Tabacum.

Class III.

"Anti-ganglionics," "Organic excentrics," "Pulsatilla type," comprises the drugs known as "Acrids," or "General Irritants," by many, and divided thus: Group A.—The halogen elements, the alkalies and alkaline earths, with their carbonates and borax. Group B.—The simple acrids, some of which, by chemical constitution, are allied with the other groups, in inferior degree, yet so as to give occasion for preference in individual instances. Group C.—The salines. Group D.—The acids, in general. These groups, in the order named, approach in properties, class IV. Such medicines as *apis*, *bryonia*, *causticum*, *helleb ore*, etc., which stimulate cerebral action, appear rather to influence the meningial tissues, in fact; those being decidedly of the organic periphery; notwithstanding the consequences to the animal functions.

GROUP A.—ALKALIES, ALKALINE EARTHS, HALOGENS, ETC.

Ammonium carbonicum.
Ammonium causticum.
Baryta carbonica.
Borax.
Brominum.
Calcarea carbonica.
Calcarea caustica.
Carbo vegetabilis—(kali carb.)
Causticum.
Corallium.
Iodium.
Kali carbonicum.
Lithia carbonica.
Magnesia carbonica.
Natrum carbonicum.
Spongia.
Strontiana.

GROUP B.—COMMON ACRIDS.

Many are allied with other groups or classes; a, like group A; c, like group C; d, like group D; e, like class IV.

Aloes.
Antimonium crudum.
Apis mellifica.
Apocynum cannabinum.
Arum triphyllum.
Bryonia.
Caladium.
Calcarea phosphorica.

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Cantharis.
Carbo animalis (Calc. phos.).
Chelidonium.
Cinnabaris.
Clematis.
Colchicum.
Creosotum.
Croton tiglium.
Daphne indica.
Dioscorea.
Dolichos.
Euphorbium.
Gambogia.
Guaiacum.
Helleborus niger.
Hepar sulphuris calcarea.
Ipecacuanha.
Iris versicolor.
Jatropha curcas.
Leptandra virginica.
Lycopodium.
Mercurius sol. (viv. and corr.)
Mezereum.
Petroleum.
Phosphorus.
Phytolacca.
Podophyllum.
Pulsatilla.
Ranunculus—bulb. and scel., etc.
Rheum.
Rhododendron.
Sabadilla.
Sanguinaria.
Sarsaparilla.
Scilla.
Selenium.
Senega.
Senna.
Staphysagria.
Sulphur.
Taraxacum.
Tartarus emeticus.
Tellurium.
Urtica urens.
Veratrum album.
Viola tricolar.

GROUP C.—SALINES.

Ammonium bromatum.
Ammonium muriaticum.
Kali bichromicum.
Kali bromatum.
Kali hydriodicum.
Kali nitricum.
Magnesia muriatica.
Natrum muriaticum.
Natrum sulphuricum.
Sepia.

GROUP D.—ACIDS.

Acetic acid.
Arsenicum album.
Citric acid.
Fluoric acid.
Muriatic acid.
Nitric acid.
Phosphoric acid.
Silicea.
Tartaric acid.

Class IV.

"Anti-opinants," "Animal excentrics," "Zincum type," comprises the (1) alcoholic, (2) etherial, (3) fœtid, and (4) aroma-

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tic substances containing volatile oil ("stimulants" and "anti-spas-pasmodics," of allopathy); (5) oleo-resins, (6) gum-resins, and (7) metals readily deoxydized, with their compounds ("anti-spasmodics" and "mineral tonics," of allopathy); (8) substances largely composed of tannic acid and their mineral counterparts ("astringents," of allopathy), some having repute as "narcotics" (?) (9) includes oxalic acid, glonoine, etc., symptomatically.

Æsculus.
Agnus castus.
Alcohol.
Allium cepa.
Allium sativa.
Alumina.
Ambra.
Anacardium.
Argentum.
Argentum nitricum.
Asarum europeum.
Assafœtida.
Aurum.
Aurum muriaticum.
Baptisia tinctoria (3d class ?).
Bismuthum.
Bovista.
Cactus grandiflorus.
Calendula.
Camphora.
Capsicum (like class 3).
Caulophyllum.
Chimaphila.
Cimicifuga.
Cimex.
Cina.
Cistus canadensis.
Coccus cacti.
Coffea cruda.
Collinsonia canadensis.
Copaiva.
Crocus.
Cubebæ.
Cuprum.
Cuprum aceticum.
Erigeron canadense.
Ether.
Euphrasia.
Ferrum.
Ferrum muriaticum.
Gelseminum.
Glonoine.
Graphites.
Hamamelis.
Hypericum.
Kino.
Ledum.
Lupulus.
Lycopus virginicus.
Manganum.
Mephites.
Moschus.
Myrica cerifera.
Nux moschata.
Oxalic acid.
Paris quadrifolia.
Platina.
Plumbum.
Plumbum aceticum.
Pothos fœtidus.
Prunus spinosa (class 2 ?).
Ratanhia.
Rumex crispus.
Ruta.
Sabina.
Sambucus.
Senecio aurea.
Stannum.

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Symphitum.	Trillium.
Tanacetum.	Valeriana.
Terebinthinæ oleum.	Xanthoxyllum fraxineum.
Teucrium marum verum.	Zincum.
Thuja.	Zingiber.

This paper would be quite deficient, in the absence of any clinical record confirming and illustrating its positions. The following cases are therefore added. I need make no apology as to the potencies used; since I have no predilections to defend, although, from successful habit, I ordinarily employ Lehrmann's 200ths, or grafts from the same. Another, accustomed to succeed with other preparations, might manage them better than these; and whatever a physician be thus accustomed to, it is certain he will commonly do the best with that of which he knows the most, whether the potency be high or low. All admit, however, that to succeed with the high, the remedy must be accurately chosen, whilst even with the low, inaccuracy is, although a great disadvantage, a less palpable evil than in the former case. Hence, any method of selection which secures success in the use of the high, particularly in acute cases, must command the interest of all.

As will be observed, the cases are adduced in the order of the classes.

Class I.

Case 1.—A healthy, fair babe, exposed to dry, cold air, took cold, with violent sneezing, accompanying cough, aggravated after nine o'clock, forenoon.

Acon. ^{200}, three doses, at intervals of three hours, followed by sac. lac.; cured at once.

Case 2.—An old lady, had typhoid fever some weeks ago; cured by homœopathy; now suffering from diabetes insipidus. Rather urgent in her desire to be waited on, in good season. Has to rise to pass water, often, at night, especially between twelve and three o'clock.

Aconitum ^{1000}, Jenichen, one dose; well, in a few days after. Two weeks later, symptoms of incipient cataract were reported. This will be noted under class II.

Case 3.—A "sanguine" woman, suffering for a week from gastric irritation, yet indulged in crude food. At midnight, taken with horrid pains in the stomach, for which she got stimulants, which aggravated the mischief. Found her greatly agitated, hot

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skin; tense, frequent pulse; things all look dark to her; severe tendernass of epigastrium.

Aconitum, ^{2,000}, Jenichen, in water, at intervals of twenty minutes to two hours; four doses relieved. Twenty-four hours after, found the case in class II, that is to say, with constipation and flatulence, with some tenderness of epigastrium. Inability to sleep well towards morning. Self-poised manner. Nux vom. ^{200}, one dose. Cured.

Class II.

Case 4.—An old gentleman, who but rarely can sleep after 3 A. M., got dysenteric diarrhœa, the periodicity being in the morning, the manner self-poised; complexion rather swarthy. Nux vom., three doses, at intervals of three hours. A few days later, reported prompt relief of the straining; but now, copious thin stools, preceded by colic; worse early in the morning. China, ^{200}, dry; three doses. Cured at once.

In the army, the same experience was many times repeated, often in cases of lieutery, but with low potencies, usually.

Case 5.—Same as case two. Dimness of vision, with an incipient cataract, easily seen in the left eye. Bad sleep towards morning. Self-poised manner. Conium, ^{200}, one dose. Cured in about ten days.

Case 6.—A young soldier, wounded and suffering from copious thin stools. Complexion, milky white; manner, self-poised, earnest; morning aggravation. Got china ^{6}, repeated doses, no relief. Cured at once by dulcamara ^{6}.

Case 7.—A lad in Illinois ran a splinter beneath his finger-nail. Next day, got the ague, at 6 A. M. Self-poised, steady manner. Parorysms averted by arnica ^{30}, one dose at bed-time.

Case 8.—A pregnant lady, usually of happy and lively temper, got severe cramps in the back part of the thighs, when lying on her back; worse, by far, after 3 o'clock in the morning. For the first time seemed to regret her pregnancy; felt surly about it, almost weeping from impatience. Cured in a few hours by iguitia, ^{200}, three doses.

Case 9.—A fine child of ten months, a girl, brunette, teething. Became very violent in manner; screaming angrily, jealous if her little brother received any notice, trying to take off her night-gown, and kicking away the bed covers at night. Bad sleep towards morning. Resolute, steady manner, in general. Cured promptly by hyoscyamus, ^{200}, three doses.

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Class III. Group A.

Case 10.—A lady, of very white and tender skin, had neuralgia of the right side of the face; worse, evening; bad sleep before midnight. Feet damp and cold. Passive manner. Cured by Calcarea ^{200}, three doses.

Case 11.—A young lad, of very fine skin, blonde; had all his life, nocturnal enuresis. Worst before midnight. After slight effect of other remedies, cured by a few doses of causticum ^{30}, taken at intervals of forty-eight hours.

Case 12.—Group B.—An elderly lady, of medium complexion, got dysentery—mucous stools, blood-streaked; worse, evening; bad sleep in the first part of the night—easy manner. Cured by mercurius sol. ^{200}, three doses.

Case 13.—A very young child, of delicate skin, had, on waking from sleep towards evening, fever, vomiting; then, convulsions with general stiffness and blueness; then, falling asleep. Relieved after ipecacuanha ^{200}, (a.) one dose.

Case 14.—An elderly lady had diarrhœa, watery and painful, veratrum did no good; got worse towards night; severe cutting pain before each stool, only. Afraid to cause trouble; quiet manner. Rheum ^{1000}, (e.) three doses. Cured.

Case 15.—A new-born babe, after its mother had taken medicine, got paroxysms of crying, lasting all day; quiet all night. On examination a red streak was found on the diaper, where the urine flowed. Swarthy complexion; passive but sensitive manner. Relieved after lycopodium ^{200}, (e.) Lycopodium is usually marked by evening aggravations.

Case 16.—Group C.—A lady, of medium complexion, pregnant, complained of a bad taste, as if she had taken Epsom salts. Periodicity not decided; manner despondent. Relieved by repeated doses of natrum sulph. ^{1000}.

Case 17.—A lady of medium complexion had symptoms of prolapsus uteri, with goneness in the pit of the stomach, weak feeling and dragging in the back and hips; depressed manner. Relieved by repeated doses of sepia ^{200}.*

Case 18.—Group D.—A middle-aged lady, brunette, was seized, at 10 P. M., with agonizing pain in the right lumbar region, typhlitis; got worse speedily; twisted and rolled and constantly changed her position; could not bear a breath of cool air;

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* Sepia, a marine animal, of course represents the saline constitution of sea-water.

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better by hot applications; not thirsty. Cured by six doses of arsenicum [200].

Case 19.—A gentleman of swarthy complexion had yellow fever; treated allopathically. Afterwards complained, impatiently, but in a jocose manner, that his "spleen filled half his abdomen." He was himself a physician. Relieved after one dose of nitro-muriatic acid, strength of the U. S. Pharmacopœia; ten drops, in water, two ounces.

Class IV.

Case 20.—A swarthy lad, got cold feet and hands, and general chilliness towards night, followed by heat all night, with sleep; throat sore and full; sensitive manner. Cured by three doses of gelseminum [1000].

Case 21.—A babe, brunette, recovered from whooping cough; took cold; coughed and retched; worse afternoon; sleepless towards morning "composite periodicity"; excitable manner. Cured by three doses of cuprum [200].

Case 22.—A rosy, excitable lady got measles, which did not come out well, until after pulsatilla. Then, had fever every day, after 12 o'clock, noon, with much excitement, until night. After aconite, became wild and restless, vomiting and purging; early in the morning watery, smelling and tasting of fæces. Relieved immediately by one dose of coffea [200]. The excitable morale, the composite periodicity, and the natural high color, are proper to class IV. But some "nervous" cases have only a sickly color; and the same occurs in organic disease.

Case 23.—A pregnant lady, of sensitive temperament, got colicky diarrhœa; cutting pain only with the stools, doubling her up; sickly appearance; worse evening and morning. Relieved by repeated doses of colocynth [6].

Case 24.—A little girl, whose sensitive cutaneous surface had been exposed to the heat of the weather, and to cold, also got diarrhœa, large, thin, painful stools; sitting on the vessel, screaming. At other times drowsy, sleeping much. Skin cool. When awake, sensitive and peevish. "Composite periodicity." Cured by nux moschata [200], in repeated doses.

The foregoing are illustrative cases, nearly all from recent practice, of the practical use of this classification. A few may now be added, showing the proper procedure in cases of conflicting indications.

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Case 25.—The same child last mentioned, afterwards got a paroxysm at night, early; waking and calling "mamma!" "mamma!" hardly to be pacified, and on recognizing the mother embracing her, pushing her away again, going to sleep and again waking and crying for help, in the same way. Loose stool in the afternoon. Repulsive mood, dogged, in the daytime. Cured by stramonium [200], three doses; but developing sore throat, with a herpes-like eruption on the fauces, and inability to swallow water, or soup containing pepper. Stramonium of class II, cured, despite evening periodicity, the morale being suitable, but drug-symptoms intervened. The more perfect the class-correspondence, the greater immunity I find, from drug-symptoms and aggravations prior to cure; the more opposed, the more of these I see.

Case 26.—Colic, in a young man, occurring at 2 A. M., and growing worse. The least motion increases it. Relieved by lying on the abdomen. Gave several doses of bryonia [200], of class III, regarding these characteristic symptoms as superior to the class indications of periodicity. Cured promptly.

Explanation of the Diagrams.

Plate I, represents the stages of irritation, partly as observed under the microscope, and still more as diagnostically inferred from the symptomatic development, progress and termination of diseases; not only the idiopathic but especially the artificial, as observed in the provings of drugs. The upper portion concerns large doses; the lower, the high potencies.

Engorgement of the dilated capillaris, following contraction, being the most patent characteristics of irritation, as this is of diseases, in general at least, the appearances of the blood-vessels are adopted as the type of the whole morbid process. Mutations of calibre and color are therefore figured in the plate, and lettered from A to D; repeated as often as necessary, in the several series.

Each grade of doses is represented as affecting three main regions, viz :

1. Region of Initial Irritation.
2. Region of Direct Nervous Connection.
3. Region of Reflex Nervous Connection.

The first, as receiving the first impressions of the drug or other irritant.

The second, as lying at the other end or pole of the same nerves with the first.

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The third, as being indirectly associated with the first, through a nerve-centre common to both.

Extensive vascular fullness in either region, we call "fever."

Under each region are figured six stages of alteration of calibre, etc., under irritation, beginning and ending with the normal condition. The first four, placed above the heavy dividing line, and designated "Primary," according to Hahnemann, signify the advance of irritation in its main phemomena. The last two stages are placed below, and are designated "Secondary," according to Hahnemann's doctrine of drug-effects, signifying the subsidence of morbid processes, so far as they have not become chronic; the effect of vital resistance of the total organism, the so-called, "reaction."

The mutations of calibre, etc., resulting from large doses, are taken as typical; and of these, the region of initial irritation presents the most regular succession of stages. These are lettered, from the normal state, A, to anæmia, B; hyperæmia, C; and imflammation, D, successively; and in the secondary division subsiding to C, and again to A. The same letters represent the same conditions throughout all the series. Should the attention of others be so directed to the subject as to either confirm or correct the diagram with respect to the less known series, its object will be equally attained. The first presents essentially the phenomena which have long been accepted, and may be at any time witnessed in the experiment with the web of a frog's foot. The remainder are the result of diagnostic inference, on the basis of the preceding.

All careful provers, having both the opportunity and the capacity for observation, will, it is believed, recognize the importance of assimilating the irritation, mainly functional, and therefore characteristic and subtle, which results from experiments with the higher potencies, with the cruder changes proceeding from large doses. No other reason need be named for the presentation of the latter half of the diagram.

Accompanying the vascular changes, as is well known, other phenomena are found in irritation. What the natural order of events may be, is a fair subject of question, but need not be here argued. The events themselves, however, are essential, in varying proportion, to the irritative process which forms so large a part of the many conditions which we call disease. A resumé of these events is consequently here needed, a single feature being presented in the diagram.

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The first series of low potency irritation furnishing the type, the stages may be stated thus:

PRIMARY.

1. HEALTH. A.

Normal—Vascular calibre, engorgement, exudation, tissue-proliferation and functional power; general comfort; equable vigor.

2. ANÆMIA. B.

Diminished—Vascular calibre, engorgement, exudation, tissue-proliferation and functional power; chill; shock; venous stasis.

3. HYPERÆMIA. C.

Increased—Vascular calibre, engorgement, exudation, tissue-proliferation and functional power; fever; arterial fulness; cardiac excitement.

4. INFLAMMATION. D.

Excessive—Vascular calibre, engorgement, exudation, tissue-degeneration and loss of functional power; general depression; exhaustion.

SECONDARY.

5. HYPERÆMIA. C.

6. HEALTH. A.

Lastly, the precise localization of sympathetic irritation is very much determined by the temperamental susceptibilities of each individual for himself, within the range of nervous connection.

Plate II, Figure 1, represents the double and opposite effects of each drug or other irritant, ipecacuanha being the example. Large and small doses are alike in being capable, with varying constitutional susceptibilities, of developing both kinds of effect; one of which is the specific drug action, "primary;" the other being the complementary vital reaction, "secondary;" in the case of ipecacuanha emetic and anti-emetic, to speak crudely. But the doses differ vastly in the degree to which each effect is produced by each. The primary drug action is the cardinal effect of large doses; the secondary vital reaction, that of the high potencies. Thus, the large doses are mainly emetic; the infinitesimal, anti-emetic. At an indefinite point between these, each individual finds a dose which for the time is absolutely inert, being neither emetic nor anti-emetic. This inert or neutral dose is in the diagram stated at one grain. The crossing of two diverging

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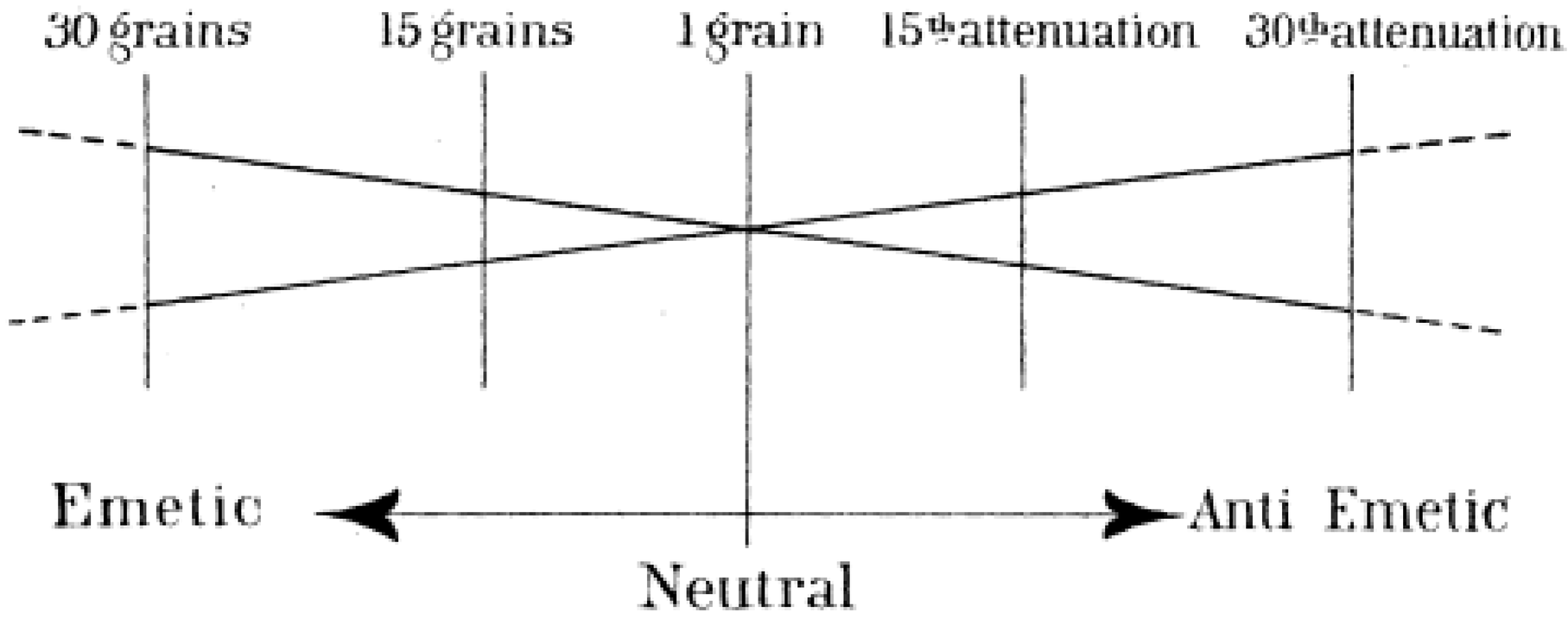
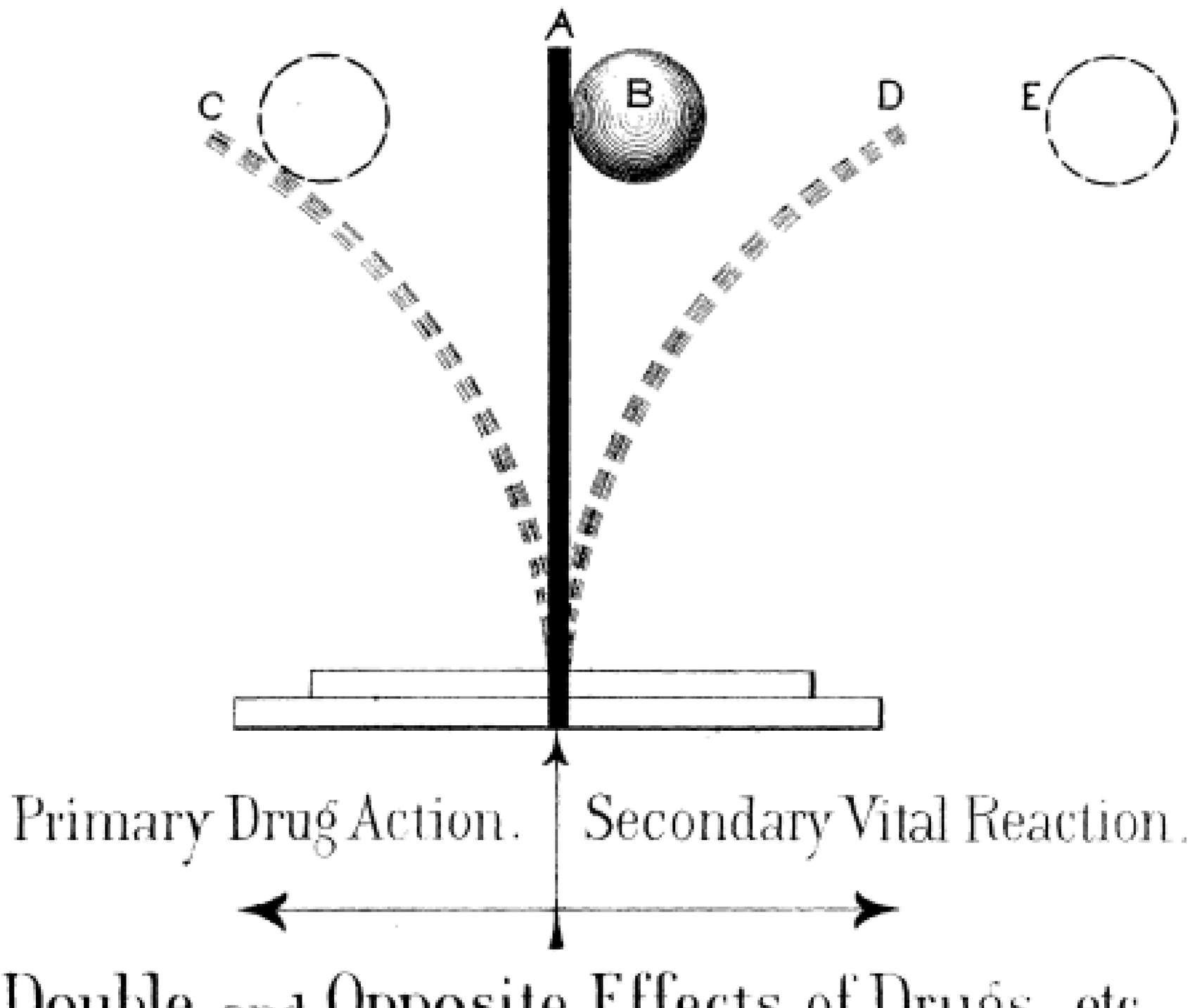
Plate 2

Fig 1.



The Three Grades of Doses ; Example – Ipecac .

Fig. 2



Double and Opposite Effects of Drugs , etc ;
or
Action and Reaction .

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Plate 3.

Anatomical Sphere of CLASS IV. (Duplicate.)

Anat[l] Sphere of CLASS II.

Anat[l] Sphere of CLASS I.

XII NOON.

Anatomical Sphere of CLASS III.

Anatomical Sphere of CLASS IV (Duplicate)

Each Sphere is represented in that part of the dial which marks its usual range of periodicity, the names of the Classes being expanded.

IX A.M.

III P.M.

CLASS I
Ganglionics, or Organic Centrics, Aconitum Type.

CLASS III.
Anti-Ganglionics, or Organic Excentrics; Pulsatilla Type

CLASS IV.
Anti-Spinants, or Animal Excentrics, Zincum Type.

CLASS II.
Spinants, or Animal Centrics, Nux vomica Type.

LIVER

STOMACH

SPLEEN

CLASS IV.
Anti-Spinants, or Animal Excentrics, Zincum Type.

VI A.M.

VI P.M.

III A.M.

X P.M.

XII MIDNIGHT.

{ Periphery of Animal Nervous System; Cortical portion of the Cerebrum, and Cerebellum; Cranial & Spinal Nerves, exclusive of their roots; and Intervertebral Ganglia; with Organs of Sense and Voluntary Motion, and General Venous System. }

{ Spinal, or Animal Centre, Spinal Cord; with its Cranial Prolongations, Roots of Cranial and Spinal Nerves. }

{ Ganglionic, or Organic Centre, Ganglia of the Great Sympathetic. }

{ Periphery of the Organic Nervous System, Viscera, Arteries, and Valveless Visceral Veins &c Serous Membranes (partially) }

{ Complement of Animal Periphery. See opposite side of Diagram. }

LITH. J. VAN BENTHUYSEN & SONS. ALBANY, N.Y.

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lines at this point produces an increasing space, illustrating increasing effect, in each direction; the left, marked successively "15 grains," and "30 grains" signifying increasing emetic, and the right, marked "15th attenuation" and "30th attenuation," increasing anti-emetic action.

Figure 2 represents, by an elastic spring, firmly erected, the vital forces and functions, in their totality—the so-called vital principles—which yields to an irritant impression in the direction of inflammation, a ball striking it from the right, giving it a sinister impulse. Secondarily, by its elasticity, it returns, representing vital reaction, with sundry vibrations, illustrating periodicity, to its normal state; and expelling the abnormal agent. The morbid condition and action of the forces, both here and in life, consists in a disturbed equipoise; the reaction, with whatever fluctuation, effects the restoration of the same.

This plate therefore applies solely to dynamic, as does the first to material, derangements; both coinciding.

Plate III.—Temperaments and drug effects present like anatomical relations.

The temperaments are defined to consist of predominant erethism of a nervous origin, dependent on unequally active nutrition, in most persons, of some one of the cardinal nervous spheres or elements. These spheres, four in number, are here figured; the fourth, twice. They are classed accordingly; but variations occur in disease and from culture.

The medicines, having general anatomical affinities, in entire harmony with their distinct individualities, are classed, accordingly as they, by virtue of those affinities, possess the power of creating artificially, a similar predominant erethism, and unequally, active nutrition, in either of these four anatomical spheres, as here figured. This is, in each case, the general sphere of their initial action, as shown by provings, etc.; the effect being propagated thence to all other parts by "sympathy," *i. e.*, by nervous association.

The four classes of both temperaments and drugs are named from the corresponding four cardinal nervous spheres, or elements, as here represented. The class-spheres of medicines being recognized by provings by use in disease, and by chemical allowances.

The nervous system is regarded as consisting of two grand divisions, organic and animal; severally concerned mainly with the tissues, organs and functions of "organic" or "vegetative" and those of "animal life;" the former being the "great sympa-

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thetic," the latter, the "cerebro-spinal." Each of these has a centric element, and also a peripheral or excentric portion.

The organic nerve-centre is admitted to be formed of the ganglia of the so-called great sympathetic nerve. The fibres going thence, locate themselves, mainly, in the tissues of organic life, the viscera, arteries, and valveless visceral veins, etc. This latter sphere is the organic nervous periphery.

The animal nerve-centre is the spinal cord, with its gangliar prolongations at the base of the brain; consisting essentially of the ultimate roots of all the cranial and spinal nerves, inclusive of the roots of those which radiate thence to the cortical portions of the cerebrum and cerebellum. All the remainder of the cerebro-spinal system is excentric, constituting the animal nervous periphery. Included in this, the animal excentric element, are the tissues of animal life, *i. e.*, the cortical portion of the cerebrum and cerebellum; the cranial and spinal nerves, to their termine, exclusive of their roots; the intervertebral ganglia, with the organs of sense and voluntary motion, etc.

These are the "four cardinal nervous spheres or elements."

The centric elements are for convenience first numbered; afterwards, the excentric, the organic in precedence; the corresponding classes of temperaments and of drugs receiving the same numbers as well as names.

The circles of the diagram are divided to represent a dial, with each three-hourly period of the day noted thereon. The anatomical figures, which are intended to show at a glance, the grand divisions and cardinal elements of the nervous system, are made to occupy those spaces in the dial which set forth, of their general characteristics, one which is of the first rank, viz: their usual range of periodicity; class 1st, 12 to 3 o'clock, A.M., and 9 to 12 A.M.; class 2d, 3 to 9 A.M.; class 3d, 12 M. to 12 P.M.; class 4th, composite and typically, evening and morning.

The appropriate numbers and names are appended, including, under each heading, the name of a typical drug of such familiar character as to suggest its affinities, in a very general way, however.

The mere numbers and titles of the classes of drugs, as well as of the temperaments and their casual variations, are here given, in relation with their anatomical spheres and characteristic periodicity. The list of the medicines, under these class headings, subdivided to some extent, as explained in the text and in the list itself, is added, in the proper place.

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