

## LECTURE XVIII.

### INFLAMMATORY GROUP.

THE inflammatory action of Arsenic upon the tissues is exceedingly marked, and may lead to the most disastrous consequences. On the other hand, the sad results of arsenical poisoning in this direction yield to the homoeopathic physician, and indeed to any physician who intelligently interprets and correctly applies the therapeutic laws of Nature, precious means of relieving suffering and of saving life.

We may consider this Group under four sub-divisions, a. *simple acute*, b. *erysipelalous*, c. *gangrenous* and d. *cancerous* inflammation.

#### a. SIMPLE ACUTE INFLAMMATION.

The inflammatory conditions which Arsenic excites along the tract of the intestinal tube, are marked by evidences of a deeply penetrating nervous disorder. These inflammations have a malignant character, tending to disorganization, and generally attended with cramps, spasmodic twitches or convulsions.

The following case reported by Brodie in the Philosophical Transactions of the year 1812, gives a very fair view of the inflammatory Action of Arsenic upon the abdominal viscera.

Surgeon Tonnelier was called to the house of Mrs. L., to give assistance to her daughter, aged nineteen years, who was reported to be in a distressing situation. He found her extremely faint, kneeling down on the floor of her room, with her head resting on the arms of her brother, being unable to support herself. Her face was unequally red, and covered with sweat; her eyes were half open, red, and suffused with tears; round her eyelids was a border of a bright-red; her voice was nearly gone; her breathing short, frequent and plaintive; she experienced horrible pains in the stomach, as if the stomach were consumed by fire; she made efforts to vomit, which were extremely distressing. This condition of things had lasted four hours when the physician arrived. The patient had taken the Arsenic about 11 o'clock. No symptom of a very distressing nature had made its appearance until the evening: during the day she had been observed often to change color in the face, and showed some other signs of suffering and anxiety; but she was obliged to conceal her pain. She ate a good dinner at two o'clock. At seven in the evening the vomiting came on with great violence; at eight she had a slight convulsion which lasted several minutes, after which the vomitings returned

with the same violence as before. As she had refused to drink, the matter vomited amounted to very little: it was composed of a part of her dinner, of a viscous matter, sometimes colorless, sometimes of a pale-yellow; together with some frothy saliva streaked with blood. The patient was put to bed. Her pulse was small, unequal, irregular and very frequent. The epigastrium was excessively sensible, and she felt excruciating pains in the intestinal canal. Deglutition was already extremely difficult; nevertheless they succeeded in making her drink copiously. By this means she vomited more easily and without interruption for an hour. The vomitings then ceased for about ten minutes. The patient rested herself upon her pillow, and appeared to sleep; she was even heard to snore. In a short time the vomitings came on again, and continued until two o'clock.

At a quarter past two, she slept again for eight minutes; stertor, the respiration was slower, then hiccough, vomiting for a quarter of an hour, coldness of the face, hands and forearms; she uttered cries from time to time; her agitation was extreme, all her limbs were contorted; an involuntary evacuation from the bowels took place for the second time since the first manifestation of the symptoms.

At three o'clock, she was a little calmer: she begged of the attendants not to speak of her misfortune. The breathing became still slower, the vomiting increased; there were fresh signs of agitation, frightful dreams; the pulse became imperceptible. At four o'clock she opened her eyes, and complained of being unable to see the light; she lamented her fate: her arms became dead. At five o'clock, her countenance was like ice, her nose and lips of a violet color, the beating of her heart could scarcely be felt; these symptoms were succeeded by a rattling in her throat, and finally death.

#### *Appearances on Dissection.*

Externally; contraction of the muscles of the face, insurmountable stiffness of the limbs; a violent color, more or less deep, over the legs, thighs, loins and back; countenance pale, lips violet; a very sensible heat of the body twenty-six hours after death.

Internally: the lungs were extraordinarily distended with blood, through two-thirds of their bulk, and especially in their posterior part. The incisions made into the lungs, showed a compact and tolerably firm texture; on the slightest pressure, blood oozed out without any appearance of air-bubbles, from a multitude of minute points on the cut surfaces. The anterior part of the lungs was red on the surface, and for the rest, tolerably elastic and filled with air.

Both ventricles of the heart contained very black blood. The left ventricle contained more than the other.

The stomach was greatly distended by the fluid with which it was filled; on its external surface was seen an infinity of small vessels injected with blood. The intestinal canal exhibited the same appearance as well on its external as internal surface, in some parts of its extent. The liver and spleen were likewise very much engorged with blood.

The stomach, having been emptied, and laid open throughout its whole extent, presented a surface apparently grained, which appearance was caused by the increased bulk of the mucous glands, the color of which was blackish; whilst the stomach itself was red, more or less dark, and sprinkled here and there, especially towards the pyloric orifice, with extremely black spots.

The epithelium of the mucous membrane was entirely removed.

There was found in the fluid taken out of the stomach a cyst, formed, according to Professor Dupuytren, by an expansion of the mucous membrane of the stomach, in which some vestiges of the vessels could still be perceived. It was about an inch and a-half long, eight lines in diameter, and its sides were about half a line in thickness. From the interior surface of this cyst, were given out very thin partitions of a cellular texture; and which contained, in separate cells, unequal fragments of a crystalline matter, which being submitted to several experiments by Dupuytren and Vanquelin, presented all the characteristics of Arsenic. This girl had attempted to poison herself on two previous occasions, and Dupuytren is of opinion that the production of this cyst belongs to these two anterior poisonings. This opinion appeared to him to be strongly supported by the circumstances that the patient complained of continual pains in that part of the stomach corresponding to that where the cyst was found.

In all cases of

*Gastro-enteritis*, to which Arsenic is homoeopathic, we shall find nausea, retching and vomiting of mucus, bile and blood; burning pain in the region of the stomach and bowels, with excessive tenderness to contact or pressure; tympanitic distention of the bowels or else diarrhetic discharges consisting of water, flocks of mucus, slime, blood, attended with more or less distressing tenesmus and agonizing pain in the bowels. The mouth and throat are parched, the patient craves drink of which the least quantity excites the vomiting. The tongue looks parched, like raw and scorched hide covered with a thick, yellow coating. The respiration is hurried, the countenance expresses anxiety and distress; gradually the features assume the pinched and sunken appearance which pathologists designate as the hippocratic countenance. The pulse is frequent, small and irregular, the extremities are cold, and may become more or less convulsed as the pain augments in intensity.

In this disease it may be necessary to give Arsenic in low doses, from one hundredth to one ten thousandth of a grain, and to repeat the latter dose every half hour until a decided improvement in the symptoms becomes manifest.

In *Chronic Gastro-enteritis*, Arsenic is likewise eminently useful. It is indicated by irritability of the stomach, occasional vomiting of food, a sensation of oppression after eating, aching and sore pains in the epigastric region, paroxysms of tympanitic distension of the bowels or flabbiness of the abdominal walls, alternate constipation and diarrhea, the discharges consisting of loose, yellow stools, or slimy, fatty, purulent matters, with more or less tenesmus, sense of excoriation at the anus, debility, loss of flesh, more or less vascular excitement, sallow complexion with occasional feverish flashes, dull and heavy pains about the head. The tongue may exhibit a whitish or yellowish coating, the tip and edges look inflamed, the mouth and pharynx feel dry, which induces a frequent craving for drink. Patients who are suffering with an affection of this kind, are disposed to long for stimulants and tonics, such as wine or a little brandy.

Arsenic from the third to the twelfth potency may reach such a case.

*Gastritis* is a disease to which Arsenic may prove homoeopathic. Among the organs to which Arsenic seems to hold some specific relation, the stomach occupies a prominent rank. We know that Arsenic may cause inflammation of the stomach even when administered by the skin. Schulze reports five cases in Hecker's *Critical Annals of Legal Medicine*<sup>1</sup> where Arsenic was sprinkled upon the hair by mistake for hair-powder. One of the patients died; two were attacked with more or less dangerous symptoms, and the remaining two had a violent inflammation of the pericranium. In the fatal case, death did not occur until the twenty-second day after the accident occurred. The hairy scalp was found gangrened and infiltrated with fluid blood. The stomach was also very much *inflamed*. In the two persons who suffered most, erysipelas of the pericranium did not make its appearance until six days after the use of the powder.

The retching and vomiting of mucus, bile and blood; the excessive sensitiveness of the praecordial region; the burning pain in the region of the stomach as if this organ were consumed by fire; the agonizing thirst with inability to swallow the least drop without causing distressing vomiting; the inflamed redness of the tongue; the heated breath, the expression of agony in the features, the icy-coldness of the extremities and the excessively rapid, irregular, feeble and tremulous pulse: all these symptoms are so many indications for Arsenic which is capable of reproducing them all in the tissues in health.

It might be interesting to inquire whether Arsenic causes gastritis by its direct, irritating action upon the coats of the stomach. We have shown that it may develop gastritis by absorption. There are many cases of poisoning on record where Arsenic in substance was found in the stomach without the least symptom of organic lesion being present.

Chaussier reports the case of a robust middle-aged man who swallowed a quantity of arsenious acid in large lumps and died without showing any other symptoms than slight syncope. On opening the stomach, it was found to contain

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<sup>1</sup> Hecker's *Kritische Annalen der Staatarzneikunde* Vol. I, p. 143-159.

the arsenious acid almost in the state in which it had been swallowed. It was impossible to discover the slightest erosion or inflammation in the alimentary tube.

Etmuller, in his *Ephemerides of Natural Curiosities*, speaks of a young girl poisoned by Arsenic, in whom neither the stomach nor intestines presented any signs of inflammation or gangrene; nevertheless the Arsenic was found in this viscus.

Other cases of a similar character might be mentioned.

In these cases Arsenic destroyed life by its action upon the cerebro-spinal axis. Hence we infer that unless the stomach is endowed with a certain amount of reactive vitality, the poison cannot exhibit its irritating effects upon this organ. It would seem, therefore, that Arsenic does not corrode the stomach solely as a chemical agent, but that a principle of dynamic vital resistance seems involved in the post-mortem phenomena of disorganization observed in cases of poisoning by Arsenic. Hence we have a right to recommend Arsenic as a remedy for gastritis upon the ground of its dynamic homoeopathicity to this disease.

*Stomacace* is another inflammatory disease to which Arsenic is homoeopathic. Arsenic causes inflammation of the mouth, tongue and fauces. In the case of Dr. Perkins, one of the first symptoms of the poisonous action of Arsenic was a *crimson line on the gums*, which has likewise been remarked in other persons. A bloody, fetid, ichorous saliva may be secreted. The mucous membrane exhibits whitish patches, as if the epithelium were destroyed; or it has a livid appearance: in some cases of poisoning, the buccal cavity has exhibited a bluish-red color. A burning heat and dryness and a foul taste are complained of. Arsenic may likewise cause the teeth to fall out.

What are the leading pathognomonic signs of *Stomacace*? First, the gums begin to swell, they look dark-red, livid; they feel dry and burning-hot, and show a disposition to bleed. Gradually the gums, along the upper edge, become pulpy, with a yellowish, blackish appearance; the subjacent mucous membrane looks red and bleeds readily. In consequence of the destruction of the alveolar border of the gums, the teeth may fall out. The sublingual glands are swollen, secreting a corrosive fluid.

All these symptoms correspond with the action of Arsenic upon the gums, sublingual glands, and the lining membrane of the mouth.

The constitutional symptoms accompanying the buccal disorganization, likewise point to Arsenic. The patient's face looks pale, the eyes retreat into their sockets, they are surrounded with blue margins. The bowels may become tympanitically distended; diarrhetic discharges take place having a sour smell and looking like stirred eggs. Shreds of mucus are mixed up with the stools. The mucous membrane of the rectum is corroded by the ichorous matter from the mouth, and tenesmus sets in.

The breath of patients affected with stomacace, has a penetrating, pungent, foul odor. Their pulse is jerking and hurried, the skin hot and dry; in the last stage the extremities become cold, and the face becomes pinched and remarkably pale.

Contrasting these symptoms of the disease with the effects of Arsenic, we shall find that this agent occupies a prominent rank among the few remedies which are adapted to *Stomacace*.

Even in *Mercurial Stomacace*, Arsenic may prove useful.

#### b. ERYSIPELATOUS INFLAMMATION.

We know from several cases of poisoning with Arsenic that this agent is capable of causing erysipelatus inflammation.

Wibmer relates a case where the powdered Arsenic was applied to the scalp by mistake for hair-powder. The poison caused a violent swelling of the head and face, followed by erysipelas of the face, neck and abdomen, and a pustulous eruption on the hands.

Belloc relates the following case in his "Cours de Medecine Legale," page 121: A woman of fifty-six years, of good health, but of a delicate and very irritable constitution, washed her whole body with a solution of Arsenic, obtained by boiling the poison in common water. She was affected with an itch, against which the ordinary means of cure proved unavailing. She swelled up enormously, and became covered with a general *erysipelas*. For several days she felt as if consumed by fire. The itch disappeared, but this unfortunate woman was taken with trembling in all her limbs, and finally died after dragging a miserable existence for two years after using the wash.

The erysipelatus inflammations to which Arsenic is homoeopathic, are of a more or less malignant nature. They may be accompanied by enormous swelling of the inflamed part, and excessive burning with tendency to gangrenous disorganization. The curative virtues of Arsenic in this form of erysipelas are beautifully illustrated in the following case, reported by Dr. Schreter:

" A farmer's wife, aged 50 years, was attacked with inflammation of the arm, which, after the lapse of eight days, terminated in gangrene. Two of her relatives had died with the same disease. Dr. Schreter, who was consulted on the twelfth of June, 1828, found her with the following symptoms: Her left arm was swollen, densely covered with black pustules which emitted a fetid odor; some parts looked like a gelatinous grayish-white mass; alvine discharges of a dark-green mucus; pulse quick and small; prostration. A cure was achieved in twelve days with Arsenic 30.

*Erysipelatus Inflammation of the Scrotum*, of a malignant nature, with swelling of the testicles, may be cured with Arsenic. Alberti mentions a case where the internal use of Arsenic caused swelling of the testicles. (See his *Jurisprud. Medica*, vol. I., p. 167.) Another case is related by Dierbach, *Mat. Med.* vol. III., p.

756. The scrotum was swollen, inflamed, covered with gangrenous bullae; the patient recovered.

### c. GANGRENOUS INFLAMMATION.

We know that Arsenic will cause gangrene. It may cause gangrene by its direct action upon the tissue with which it comes in contact, and by absorption.

Flandin reports the following case of poisoning where Arsenic caused a disorganization of the stomach which seems to have been of a gangrenous character.

I am aware that Christison doubts the gangrenous nature of the disorganizations discovered in the stomach in this case. Flandin who reports the case in full in Dr. James' own words, makes no comments upon his statements, and seems, on the contrary, to accept them as correct. Taylor, Wibmor and other toxicologists, mention sphacelus of the stomach as one of the occasional, although rare effects of arsenical poisoning. Here is an abstract of the case:

Soufflard, a man condemned to death, swallowed nearly three hundred grains of Arsenic. After drinking water he was immediately seized with violent vomiting. When first seen by the physician his features looked horribly altered. His lower lip looked as if it had been cauterized; the mucous membrane was white, cracked and exceedingly painful when touched ever so little. The tongue was swollen and looked grayish. The patient complained of a horrid taste in the mouth and throat. The pulse at the wrist was scarcely perceptible, small, wiry, irregular; the skin was cold as marble; it was covered with a clammy sweat, especially on the forehead and temples. From time to time the patient stretched his limbs, and after having left them straightened out for a few moments, he let them sink into a state of complete relaxation. He complained of a horrible pain in the stomach as if burnt by fire. Two hours after having taken the poison the patient was seized with a violent chill and chattering of the teeth; at the same time the muscles of the face were frightfully contorted. The bowels were moved involuntarily, the discharge had a yellow appearance. The respiration became moaning and hurried; the skin was icy cold and the face showed a death-like pallor. The pulse had disappeared. Vomitings and alvine discharges of a yellowish substance took place. There was an excessive urging, but inability to urinate. The patient was exceedingly restless and suffered horrible tearing pain in the bowels. Towards the last, the abdominal walls were very much contracted and drawn towards the spinal column.

A post-mortem examination revealed the following facts: bright redness of the gums, the inner surface of the cheeks, the curtain of the palate, the uvula; considerable swelling of the tongue; grayish and sanguinolent patches scattered over the inner surface of the pharynx and esophagus. The stomach was found completely disorganized. The mucous coat was transformed into a blackish, glutinous pulp which it was quite easy to detach. Underneath this pulp a

bleeding, granular surface might be seen, resembling sores that are covered with gangrenous vegetations. In some portions of the stomach, the serous coat seemed to be alone left; near the pylorus, a grayish spot about three fingers in width was seen, which looked as if tanned. The mucous membrane in this region looked as if it had been cauterized with an acid. The vena porta was found enormously distended.

In this state of dreadful suffering the patient retained his consciousness to the last moment.

This case of poisoning gives us a fair view of the functional phenomena which are observed in gangrenous inflammation of the mucous coat of the stomach, violent chill, burning pain in the stomach as if consumed by fire, excessive sensitiveness to pressure of the epigastric region and the region of the stomach in particular, constant retching and occasional vomiting of foul mucus, bile and blood; an unquenchable thirst, vomiting being provoked by the least portion of liquid introduced into the stomach, inflammatory redness of the tongue which may be slightly coated; coldness of the extremities, excessively hurried, feeble, filiform, irregular pulse; pallor of the countenance, expression of distress and agony in the features; these are some of the distinguishing features of this dreadful and so often and speedily fatal malady.

In this disease the second trituration, and even the first centesimal may be given without hesitation in half-grain doses every half hour until the disease seems checked in its fearful progress.

Arsenic has caused gangrene of other parts, such as *Gangrene of the Penis and Vulva*. In one case, reported by Pfann, the glans penis assumed a livid appearance, became swollen and cracked. In another case, reported by Degner, in his "Acta Naturalia," the penis became swollen, inflamed and gangrenous, with horrible pain. Stahl, in his treatise on "Medical Chemistry and Physiology," reports a case of sudden gangrene of the penis by Arsenic.

In a case of gonorrhoea, with phimosis, the prepuce and anterior half of the penis became suddenly attacked with gangrene; the pains were frightful; fetid and foul blood was discharged from the urethra. After Arsenic 30, the upper portion of the prepuce came off in twenty-four hours; the gonorrhoea ceased likewise.

*Gangrene of the Tongue* has been caused by Arsenic, as we may infer from the case reported by Baylies, where the lips and tongue exhibited a bluish appearance.

Malignant glossitis may terminate in gangrene. If gangrene threatens to set in, the constitutional symptoms which show themselves in every other form of gangrene, will become manifest, such as: coldness of the extremities, sinking, irregularity and extraordinary frequency of the pulse, expression of agonizing distress and livid pallor of the countenance. A flow of ichorous, sanguinolent saliva; a cadaverous odor from the mouth, and the sloughing off' of shreds or patches of lining membrane and parenchymatous tissue, mark the presence of a fell and destructive disease.



Arsenic from the third to the sixth or even eighteenth potency may be most appropriate.

In *Diphtheria*, Arsenic is resorted to if the pathological process threatens to terminate in gangrene.

*Gangrene of the Extremities* is supposed to have been caused by Arsenic. The case was originally published by Dr. Forget of Strasburg, and transferred to the columns of the North American Homoeopathic Journal by Dr. Marcy.

A man, sixty-three years of age, took two ounces of Arsenic: an hour afterwards, vomiting came on, accompanied by colic and frequent alvine evacuations. Nine hours after the ingestion of the poison, the face was pale and haggard, the extremities cold, as well as the nose and ears; the pulse small and quick, the tongue moist and icy, and the weakness very great. There was much pain in the abdomen, the stools were very fluid, but the intelligence was clear, and the answers slow.

The patient took the sesquioxide of iron, and ether, and had sinapisms applied to the arms and legs. After this, vomiting recurred, and in two hours reaction was established; the extremities became warmer, and the face was less pinched and more animated. The reaction increased for a little while, the symptoms became less marked, and two days afterwards the effects of the poison had entirely disappeared. *Severe pain in the left leg* was, however, complained of, and that limb was somewhat cold and tender on pressure. This pain went on increasing; *the pulsations of the femoral artery became gradually weaker, and mortification set in.* Amputation was performed ten days after the Arsenic had been taken, but the patient rapidly sank; *sphacelus occurred in the stump*, and he died twenty days after taking the Arsenic, and ten days after the amputation.

It may be doubted whether the Arsenic caused the gangrene in this case; but this would not invalidate the curative adaptation of Arsenic to this disease. In the present case, the patient may have been predisposed to gangrama senilis, and the poison may have given the disease a preternatural development. But even taking this view of the case, the power of Arsenic to develop gangrene of the extremities, is not disproved thereby. For, it is questionable whether the disease would have been thus prematurely developed under the influence of other poisons.

In *Humid Gangrene*, when the parts look livid, with scaling off of the epidermis and effusion of a turbid fluid in the subcutaneous tissues, Arsenic is one of the most important constitutional remedies.

*Gangrene of Hospitals*, or *Hospital Gangrene* has to be treated with Arsenic. In hospitals where the air becomes vitiated by the crowded state of the wards, ulcers often assume a malignant aspect and become gangrenous. The secretion of pus is interrupted, and the sore becomes covered with a grayish and tenacious sanies. The gangrenous process extends from the centre of the sore towards the edges which become inflamed, swollen and everted. The constitutional signs of

this destructive malady gradually and rapidly manifest themselves. The middle potencies of Arsenic from the sixth to the eighteenth are adapted to this disease.

*Gangrene of the Lungs, or Necro-pneumonia*, is another affection where Arsenic may palliate the symptoms, if a cure should be impossible. The only pathognomonic symptom of this disease, according to Dr. Stokes, is the extraordinary and disgusting odor of the breath and expectoration, which is generally constant. This symptom is sometimes so prominent that no one is willing to go near the patient. The gangrened portion of the lungs is of a purple, greenish or blackish tint externally. On cutting into the parenchyma, it may be found engorged with a bloody serum, or a fluid may run out of it which has been compared to a mixture of soot and water. Two interesting cases of this disease are reported in the American Medical Intelligencer of August 1st, 1838, and Oct. 15th, 1839. Arsenic is one of the few remedies, and perhaps the only one that may prove useful in this disease. We prefer the middle potencies from the fourth to the twelfth.

In *Gangrene of the Bronchia* Arsenic may be depended upon as an energetic remedial agent. Under the name of malignant bronchitis, Schoenlein gives the following characteristic description of this disease: "Towards evening the patients are attacked with a violent burning pain, particularly under the manubrium sterni; this pain is accompanied by a peculiar oppression of breathing; the chest of the patient feels as if constricted; respiration is carried on with the abdominal muscles. If the patient attempts to expand the chest, the burning sensation under the sternum increases. Even now a peculiar rattling is heard, arising from the mucus which fills up the bronchia up to the point of bifurcation. This accumulation of mucus in the bronchia excites paroxysms of cough, during which the patients breathe with their necks stretched forward and the face assumes a livid hue; the patients raise a little greenish-yellow mucus which is sometimes tinged with blood. The pulse becomes very rapid, though not hard or jerking; the skin is burning hot and the patient is tormented by a violent thirst. This disease may terminate the patient's life quite suddenly."

A post-mortem examination shows that the mucous lining of the bronchial tubes is dark-red, often even of a cherry-brown, bluish or violet color. In the smaller bronchial ramifications it assumes a still darker hue, until finally it looks almost black.

It is evident that Arsenic is homoeopathic to these symptoms. It may be given from the fourth to the twelfth potency.

*Angina gangraenosa* may be advantageously treated with Arsenic. In this disease the tonsils become covered with a yellowish exudation which soon changes to a grayish-yellow color. This layer of exuded mucus frequently spreads over the back part of the pharynx, the inner surface of the cheeks and even the lips. It may even involve the larynx, causing paroxysms of choking and cough with expectoration of lumps of purulent mucus. The breath has a cadaverous odor.

There is violent fever, dullness of the head, a frequent pulse which it is sometimes impossible to count. The skin is burning hot. Towards evening the patient becomes delirious. The delirium is at times furious, at others bland.

This disease is most frequently met with during epidemic scarlet fever. It may occur before, during or after the fever.

There are very few drugs that share with Arsenic the extraordinary power to produce gangrenous disorganizations of the mucous lining. In one case the upper portion of the larynx and esophagus were almost black. Arsenic causes dryness and burning of the throat, with excessive pain when swallowing, and inability to do so. It causes great thirst and a constant craving for cooling drinks. It likewise develops all the croupy symptoms which may characterize this disease in its last stage: bluish color of the lips and face, bloating of the lips and face, expression of distress and agony in the features, hoarseness and even loss of voice, excessive wheezing and agony of breathing. The feeble, tremulous, galloping pulse and the icy-coldness of the extremities indicate Arsenic.

The symptoms which characterize

*Putrescence of the Uterus*, indicate the use of Arsenic in this disease. The creeping chills, the hot and dry skin, the hurried and filiform pulse, the peculiar alteration of the features, the restlessness and anguish, the unquenchable thirst, and, at a later period of the disease, the offensive, colliquative diarrhea and the retention of urine, point to Arsenic as one of the remedies in this distressing and dangerous affection.

*Anthrax* or *Pustula maligna* is another gangrenous disorganization with a short description of which we will close the chapter on this class of diseases.

First, a dark-looking, slightly raised papula is seen upon a hard base, the indurated subcutaneous cellular tissue. After the lapse of twenty-four or thirty-six hours, a small vesicle or bulla starts up at the summit of the papula, having a lead-colored appearance, and filled with a reddish, serous fluid. The accompanying fever is violent, at first inflammatory, erethic, and afterwards running into the typhoid type. The patient looks pale, the pulse is small, quick, feeble. After the vesicle breaks or collapses without breaking, a dark-gray, black, generally compact scurf forms, surrounded by a rose-colored areola. The affected part may swell up, having a livid, bluish appearance. Among the medicines which may be required for the cure of this disorder, Arsenic may be mentioned as occupying a prominent rank. If the fever is high, Aconite may be given in alternation with, or previous to, Arsenic. In

*Anthrax of horses* or cattle, or *Contagious Carbuncle*, *Glanders*, Arsenic will be found useful. The fourth up to the twelfth potency may be most useful. It is well known that this disease is not only contagious, but that the contagion may remain so permanently and tenaciously fixed that even the tanned hide of a glandered beast may still infect persons in a suitable state of receptivity.

d. CANCEROUS FORM.

For years past, Arsenic has been looked upon, and has been extensively used as a remedy for cancer. There is no doubt that Arsenic is capable of exercising a powerful modifying influence over cancerous ulceration. Several interesting cases of cure of this disease with large and small doses of Arsenic are on record in the archives of homoeopathic literature. We will only relate the two following; the first being a case of *cancer of the lips* reported by Dr. Atomyr:

A little girl six years old, lost the left half of the upper lip and the soft parts of the face as far as the malar bone, and laterally a good portion around the left corner of the mouth, by a cancerous ulceration. Arsenic 6, a dose every eight days, effected a cure within six weeks.

Another case of cancerous ulceration is reported by Dr. Lobethal, who treated a woman of seventy-one years for a *cancerous ulcer* in the face with Arsenic 30 internally, and an ointment made of hog's lard and Arsenic 30 externally; the carcinomatous character of the ulcer disappeared, and the ulcer healed down to the base; the cure was complete by giving Silicea.

The other case is a case of *Cancerous Ulceration of the Tongue*, reported by Charles Lane in his "*Collection of Select Cases.*"

A man, twenty-three years old, applied for help in June 1813. He had a very unclean ulcer under the tongue. Some time ago he had a similar ulcer on the tongue, but it had been healed. Upon examining the tongue, I discovered in the place where the healed ulcer had been, a deep irregular fissure, with raised, shaggy, hard edges, which communicated with the ulcer below. Upon introducing a probe, it penetrated through the substance of the tongue into a deep-seated ulcer at the root of the tongue, and thence into the pharynx. The sore looked most hideous, and was evidently cancerous. Deglutition was exceedingly painful, and he complained that the pain had extended of late behind the ears as far as the occiput and nape of the neck. He had been put on mercurial treatment which had made the matter worse. The general health of the patient had been very much shattered, his pulse was small and tremulous; the least exertion exhausted him; his hands were cold

and clammy, and his strength prostrated. This frightful disease was cured by a solution of Arsenic used internally and externally, (probably Fowler's solution.)

*Cancer of the Chimney-sweep* may be treated with Arsenic third to sixth, or higher. In this affection the ulcerous process proceeds from the lower part of the

scrotum, where a superficial, painful ulcer, with hard and elevated edges first develops itself.

It would be absurd to recommend Arsenic as a panacea for cancer; but we know from experience that it may afford relief even in cases where no cure is possible. The external use of Arsenic in cancerous affections may be advisable, provided the utmost caution is used as regards the dose. A physician in Paris uses a secret wash in cancer of the womb, the application of which to the cancerous sore affords great relief from the horrible burning and lancinating pains which characterize carcinoma of the uterus.

Arsenic, if applied to an external sore in too large a quantity, may induce fatal consequences. An arsenical paste applied to ulcerated breasts, or fly-powder to a sore head, has resulted in gangrene of the parts, inflammation of the stomach and bowels, convulsions and death.