AN ADDRESS

ON

GOOD REMEDIES—OUT OF FASHION.

Delivered at the Annual Meeting of the Metropolitan Counties Branch.

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My first duty, which is a duty and a pleasure alike, is to thank you most sincerely for the high honour and distinction you have conferred upon me in electing me President of this most important Branch of the British Medical Association. But while I feel the honour deeply, and know that it is one which might well be coveted by the most distinguished members of our profession—as, in fact, it has already been held by many such—I am quite sensible that the position brings with it deep responsibilities, and that it behoves me to take good heed, not only that the welfare of the Branch suffer no deterioration during my term of office, but that, on the contrary, the ensuing year should be marked by at least the onward progress which has been the characteristic feature of this part of the Association under the guidance of my predecessors.

The sketch which has this afternoon been given you of the work of the past year proves how many and how varied are the subjects which come before, and which are influenced by, this Branch; and though it has been the happiness of our friends here—my predecessor—to conduct not a few of these to a happy termination, some of them are of such a nature that no single year of office can possibly inaugurate and complete them. Great honour be to him for the devotion, as regards the time and labour, which he has given to the duties which a year ago he undertook; to the judiciousness with which he has presided over numerous most important meetings of the Branch; and to the great success with which he has conducted its affairs.

It is no small honour—it must be a source of high gratification—to him, during his tenure of office, to have furthered the progress of medical reform, to have established two new Districts in connection with our Branch, and, above all, to have presided at the inaugural meeting establishing the system of the collective investigation of disease—a magnificent success, the influence of which will go on still extending, and which will never be forgotten by those who heard or have since read the mastery and telling addresses on that occasion—I ought rather to call them orations—of Paget, of Gall, and of our most esteemed Vice-President, Professor Humphry.

But a position of this kind induces—nay, compels—me to pause and consider. This is, possibly enough, the last presidential chair I shall be called upon to fill, and my mind very naturally reverts to the time when, then a very young man, and indeed, too young for the honour, the kindness (and I suppose the wish to encourage me) of the members of the Harveian Society made me their president. This was so long ago as the year 1847, and the space of time thus bridged over amounts to fully more than five-and-thirty years. At that time, Sir Henry Holland, and Chambers, and Bright, and Williams, and Latham, and Addison, and Graves, and Stokes, were in the full career of medical practice; the classical lectures of Watson were the text-book—and a glorious one it was—on medicine; and at that time the clinical lectures of Todd, which were destined to produce so great a modification in treatment, were a thing of the future. Brodie, and Fergusson, and Liston, were amongst those who divided between them the surgical honours of the metropolis.

It is excusable, perhaps, if one loves to recall the names and the memories of those to whom one was indebted for one's knowledge in the earlier periods of professional life; and some of these names, and those of Quain, and Sharpey, and Graham and others, involuntarily rise up on an occasion of this kind. But as there were brave workers then, so there have been ever since, and every branch of our profession has made during the interval enormous strides forwards, enormous advances, of which the most conspicuous especially in regard to definite and well-based knowledge—to positiveness; not that vague theories have not cropped up to live for awhile and then to

die, as such theories always do, sooner or later; but still the solid matter-of-fact additions to our knowledge have never been excelled, and have scarcely been equalled, in any similar period of bygone times.

All this is fully and frankly admitted, and I bow to and reverence the skill, the talent, and industry, and untiring labour which have produced results so brilliant. But, unfortunately, there is no un-mixed good; and the very exhaustive way in which some diseases have been studied, and the widespread manifestations which they have been shown to have, lurking under and explaining symptoms and conditions with which they were before never suspected to be connected—all these circumstances have led men to attribute thoughtlessly to such causes almost every ailment, every ailment, and symptom with which they meet. You will, of course, associate with the most learned investigations into gout and syphilis the names of two of your former presidents; and their admirable works on these subjects have not only made the whole history and all the conditions of these diseases the common property of all medical men, but have so impressed men's minds—and I think their imaginations also—that they see these diseases everywhere, and loosely attribute to one or the other almost every patient, certainly every patient not otherwise easily explained—with which they meet. If a diseased condition be relieved or cured by iodide of potassium or by mercury, such persons can never be persuaded, whatever the proof to the contrary, that syphilis is not at the bottom of the affection; and if you have pain or ache now-a-days, or an eruption, or bronchitis, or anything else whatever the matter with you, it is, with scarcely a doubt, "gouty" or "syphilitic," according to circumstances, latent or irregular, or metastatic, or Protean, or something else, but at any rate the patient is "gouty." Gentlemen, at present "gouty" is a fashionable word, the use of which at least sounds well and saves trouble, even if its careless use not unfrequently throws erroneous light upon a set of symptoms, and upon many a case of disease.

But such notions do not do things come into, but they also go out of fashion; and, remembering as I do the days of yore, I think that, deluged as we now are with so-called new remedies, such as hydrastin, iridin, sanguinarin, baptistin, glonoin, gelsemin, euonymin, mucuna, muscarin, the quack chlorodyne (of which I never in my life prescribed a single dose), eucalyptin, thymol, ingulin, asclepiadin, and a host of others, the advertisement which fill the pages of our journals, and of which that some valuable plans of treatment have been allowed to fall into disuse, and that there are such things as "good remedies out of fashion." May I tell you my views on some of these?

Some whom I address will, without doubt, say to themselves, especially as regards certain points of practice which I urge, "Why, under such circumstances, that is exactly what I should do myself, and what has always been my practice." To each of these, I would say, My brother, I am delighted and thankful to have my views confirmed by your experience; help me to spread more widely the principles and the practice which I believe to be fraught with good, and may we long be workers together in the same harvest-field." But I know too well that I am addressing some, especially the younger members of the profession, who will look upon these things as some strange and new doctrine, or as prejudices clinging to me from my earlier days, or as antiquated customs of which the progress of modern science has shown the futility or the wrongness. To such I would say, "My brother, take my words only as suggestions; weigh them impartially, and think these matters over from a different standpoint from that from which you have been accustomed to view them. If, then, you do not see as I do, you will, I know, look kindly on my convictions, and believe that, like yourself, I desire the welfare of those placed under my care, and that you should concur in my views, you will find yourself armed, I believe, with weapons which, if they have thus far lain by idle, will be found, when drawn from the scabbard, to be made of true and trusty steel."

Let me premise, however, with reference to fluctuations in plans of treatment and of diet, that the period to which I have alluded has seen the rise and the subsidence of the wild mania for giving alcohol in some form or other, in almost every kind and in almost every case of disease, and is now witnessing the rising into favour of the more rational plan of giving nourishment extensively in the mild and bland, and usually easily digested, form in which Nature provides it—milk.

I well remember the time, twenty to twenty-five years ago, when alcohol-giving was so rampant, that it was difficult to see a patient who had been a few hours in the hospital before the time of one's visit, who had not already been put, almost as a matter

of course, by the physicians or clinical assistant, on three or four ounces of brandy, or on double that amount of wine; and because I would not give way to that alcohol-craze, and ventured to show that many serious diseases might be cured with the administration of little or no alcohol, I was considered (I well so deserved) the most unorthodox of teachers, if not something worse than that. I have always held, and still hold as firmly as anyone does, that alcoholic stimulants are in some cases most valuable remedies, and I would not practise my profession if I might not use them when and where I deem them needful. But I always preached against the foolish, and I would almost say wicked, use of alcohol which was common some years ago, and, I am glad to say, is still common in my clinical lectures at that time, that the students I addressed would live to see the day, even if I did not, when the pendulum of opinion would swing in the opposite direction, and when alcohol would be decried almost as much as it was then being overpraised. It is not always, gentlemen, that a prophet lives to see so completely the fulfilment of his own sayings when they foretell a revolution so complete. May a calm judgment guide the sober and noble profession, and, while we give up the routine and indiscriminate use of the remedy, may we better know how and when to employ it for the benefit of those whose lives are in our hands!

It is within the knowledge of all of us, then, that a most marked change has, comparatively recently, taken place as regards this most important question of alcohol-giving, and in the belief as to its necessity: on every-day and on some of the most important medical debates, the common current of conversation, all bear evidence in the same direction; but it is almost impossible to trace evidence of this kind, or even the results of private practice, statistically, or to reduce them to a clear tabular form; but it occurred to me that the hospitals might give more definite information. I applied, therefore, to the secretaries of the large metropolitan clinical hospitals, and have received, from all excepting two, replies containing most interesting, important, and valuable facts, to which I have done much from their books must, I am sure, have cost these gentlemen much small amount of time and trouble. I thank them most sincerely for their courtesy, and have pleasure in thus publicly expressing my obligations to them.

I trust that the tables which I have thus been enabled to construct will interest you. They place, I think, in a more trenchant and striking light than I have been able to do, the enormous increase in the rise and fall of excessive alcohol-giving; and it is worthy of special remark, as shewing the influence and (may I say?) the contagiousness of custom, how very uniform in point of time this rise and fall has been in almost all the hospitals. You must not consider, however, even these tables as giving more than an approximate idea as to the amount of alcoholic drinks consumed by the hospital-patients, because it is impossible to eliminate from the totals the amount taken by the servants, nurses, and others; however, in some cases the wine and spirits are separately named, and it is reasonable to suppose that the working staff would be allowed but very little of these, and that therefore the amount stated represents very closely that used by the patients alone.

You will see, therefore, how rapid was the increase in the use of alcohol between the years 1862 and 1882, and, indeed, in many cases up to the year 1872; and you cannot fail to trace therein the great influence of the teaching and writings of Dr. Todd, and especially of his views on the "Treatment of Acute Diseases." You see also that even where there was some diminution in the use of alcohol (I refer for the reason above given chiefly to the "wine and spirits" column of Table 2) between the years 1862 and 1872, the difference was not generally speaking, large; but when the wrongness and the evils of this excessive use of stimulants began to force themselves upon men's minds, and, thanks to this and to the careful, prudent, and honest energy of Parkes, a change of practice occurred, the consumption of alcohol diminished so much as to show in 1882 a most remarkable reduction in the cost of wine and spirits in all the hospitals (except St. George's) from which I have received returns. Thus (without making corrections for the somewhat increasing number of beds), the cost of wine and spirits consumed every tenth of an ounce, from 1862 to 1882, at Guy's, was £496, £1,231, £1,446, and £953; at Middlesex, £215, £550, £413, and £353; at Westminster, £208, £432, £367, and £137.

On the other hand, the use of milk has most rapidly increased in every hospital, without exception, and has replaced—I believe, greatly to the advantage of the patients—the alcohol in the treatment of disease. The quantity consumed in 1852 at St. Bartholomew's cost £684, and in 1882, £2,012; at Guy's, £236 and £1,408 respectively; at the London Hospital, £426 and £2,427; and at St. Ann's

It is not long ago that, in a very urgent case of bronchitis, I advised the administration of an *EMETIC*; when the gentleman whom I had been called to meet in consultation said, "Why, I never gave an emetic to an adult in my life." In former times, it was not unusual, on the contrary, to commence the treatment of many diseases with the administration of a dose to procure vomiting; and the remedy might then be given sometimes indiscriminately and according to routine, only those who have seen the effects of emetics, properly and judiciously given, can conceive the beneficial effects they sometimes produce. In the early stage of an attack of croup, it was by no means unusual to give an emetic of tartarised antimony or of ipecacuanha; and it is in accordance with the recorded experience of some of our most successful and most practical men, and quite consonant with my own experience too, that the symptom which presented the most certain anxiety of a severe attack were by these means cut short, the hoarse voice resumed its natural character, and the feverish symptoms were in a few hours relieved. I know quite well that a great fear is entertained by some as to the depressing effects of emetics; but the fear is theoretical, and not practice, and those who have had the most experience in the administration of them best know how groundless this fear is. In a difficult case, too, I have seen the false membranes which are out of the reach of local remedies, and which the patients cough and cough in vain, and utterly exhaust themselves to get quit of, readily brought up by the action of vomiting, to the immense relief of the sufferer.

In suffocative bronchitis, the effect of emetics is sometimes magical, and the administration in such cases not only is immense relief given, but I verily believe—I am quite sure I have seen it—has been called to a patient who has been ill a few days, with increasing dyspnoea; she is sitting up in bed (I draw from nature), for to lie down is impossible; she is restless, and tossing about; the lips, and indeed the whole face, blue; the eyes watery and staring; the pulse quick and small; the cough constant; the expectoration semi-transparent and mucous; over every square inch of the chest, front and back, from apex to base, and abundant and in masses, are seen the most copious and sibilant ones in the upper part of the lungs, and mucous rales towards the bases. Ammonia and stimulants, right and good in their way perhaps, in such a case are too slow in their action; the patient is, in fact, more or less slowly, more or less rapidly suffocating. An emetic of twenty-two grains of ipecacuanha in an ounce of water is given; in ten or fifteen minutes, the patient vomits and brings up a huge quantity of mucus, and the mucus, and the whole aspect of the case is altered; the distressed countenance is relieved; the breathing is at once quieter; and the patient is able for the first time for the past twenty-four hours to lie moderately low in bed, and to get some sweet refreshing sleep. The patient is, in fact, rescued from the extremest peril, and in this case, and in many similar ones too, I believe, from otherwise most certain death. Of course, in such cases the emetic is not given for its effect on the stomach, but for its collateral effect in clearing the air-passages of the enormous amount of secretion which accumulates in the bronchial tubes, and which the patient is otherwise quite incapable of getting quit of; and thus the half-choking, almost asphyxiating, condition is changed for one of comparative comfort, and time is gained for the action of other appropriate remedies. No doubt the secretion may, and often does, continue again; and I have not hesitated again in bad cases to repeat the same remedy; but it is a fact, and a very positive one too, that, quite contrary to what those who have had no experience in the plan suppose, the system rallies instead of being more depressed under the action of the remedy; and, in the language of one who had had thirty years' experience in the beneficial effects of ipecacuanha in emetic doses, it is, so administered, "a powerful restorative in some cases of exhaustion and sinking" (Higginbottom, *Lancet*, 1845, Jan. 12).

My object is not to write an essay on these remedies, nor even to name all the cases in which they may be useful; such as where certain poisons have been taken, or where it is certain that a mass of hard and non-digested food gives rise to intense cramp and horrible pain in the stomach. In such cases, I have no doubt any one would use so obvious a remedy, notwithstanding the statement of my friend who told me that he had never in his life given an emetic to an adult. But I would wish to mention the great use of which they are in the commencement of the treatment of many (perhaps most) cases of delirium tremens: for they often themselves quieten the patient, and even produce, after their immediate effect, sleep; while I firmly believe they materially curtail the duration of the disease, and render the effects of the other remedies more speedy and potent. It is consonant with experience and with fact, that the use of remedies from a well cleaned-out stomach should be more rapid and

sickness often came on suddenly, sometimes after food, but very frequently when no food had been taken. She always brought up more or less of a rosy mucus, and very frequently, especially towards the end of the retching, the ejecta were very acid; often the quantity brought up was very small, though the retching might be long-continued. There has been no hæmatemesis, and the vomited matter had not presented any sarcinous characters. I wish particularly to observe, that both the nausea and her headache, which was one of her very distressing symptoms, were always relieved for a time by the vomiting. This "sick headache," though affecting the whole head, was almost always most acute in one or the other temple, where it occupied the space of a half-crown or crown-piece, and was accompanied by a distressing throbbing of the same part. The various remedies she had taken had entirely failed to relieve her condition for good, and, so far as her chief symptoms at least were concerned, had been entirely ineffectual. Not to trouble you with a further detail of symptoms, I may add that, on further examination, I satisfied myself that there was no ulceration of the stomach, nor any other organic disease. The renal functions were practically right; there was no extraneous cause to account for the persistent sickness and the other accompanying symptoms. In fact, this fell into the category of cases of which I have seen scores, and which are, doubtless, perfectly familiar to every one here present. Well, under these circumstances, I ventured with confidence to promise her that she should be sick only once more—namely, that evening; and that, on that occasion, the sickness would be of my producing. Accordingly, I prescribed for her an emetic of twenty-two grains of ipecacuanha in a glass of water, to be taken at intervals of five minutes after the draught until she had been at least once thoroughly sick. She was then to drink a tumblerful or two of warm water, which would also before long be brought up, and would thus wash out pretty completely the stomach. An hour after that, food, in the form of boiled milk, might be taken. All this was done. A large amount of the rosy mucus and intensely acid secretion, to which I have already referred, was brought up, and the patient was under my observation for about three weeks, she had not one single return of the vomiting. The pain between the shoulders, and that in the head, were removed; and she was practically cured by that single dose.

Now, in these cases, the sickness, I believe, depends upon the stomach secreting a morbid matter, which, on the one hand, causes fermentation of whatever food is put into it; and, on the other, by its irritation of the sympathetic system, causes the sick headache—paradoxically speaking, the patients may be said not to have a headache, but a "stomach-ache in the head." Nature, then, tries to get rid of the irritating secretion, and so causes the patient to vomit. The action is, however, only partially effective; but, for the time, the patient gets notable relief from all the symptoms, only, however, that they may recur again when more of the ferment is secreted by the stomach, and when fresh food is taken. Now, the emetic does thoroughly and effectually what Nature attempts to do in a month past, but has been trying to effect; its action is mainly, in the curative point of view, mechanical; the stomach is not only emptied of the morbid secretions it contains, but the gastric follicles are thoroughly squeezed out, and, no more ferment remaining, no more sickness occurs. I have cured a vast number of cases (for, as I have said, they are very common) in this way; the plan is reasonable, and, in right cases, is very sure. In no instance of *similia similibus curantur*, as might at first glance appear to be the case, but, exactly the reverse; if we acted on that principle, we should give remedies to increase the morbid ferment; but in this we give a remedy which removes the cause, and forthwith the effect ceases. The yeast is thoroughly cleared out of the vat, and new wort being put into it, no longer has the fermentative process set up.

If there be one single remedy which Nature or art has given as more thoroughly, more widely, more universally useful than others, it is OPIUM; and I could well fill the time allotted to me by recalling to your memory cases in which it was formerly much more used than now, and modes of its administration which are no longer in fashion, yet which were, withal, good. Dover's powder, comparatively rarely prescribed at present, was at one time almost a popular remedy; and a diaphoretic and sedative dose of it (especially, in some cases, combined with James's powder), taken at bedtime, has, times without end, cut short, in their early stages, attacks of catarrh, which, with all their disagreeables, are nowadays allowed to run their course.

There is in the world a great deal of what I am accustomed to call "needless, useless coughing." Where secretion takes place into the bronchial tubes, it must sooner or later be brought up; and for

this purpose some "necessary" coughing must take place, or the patient will choke. But, both in organic diseases and in slight inflammatory or irritative affections of the air-passages, there is often an immense amount of useless coughing—useless, that is, as regards bringing up any laryngeal or bronchial secretion, and, so far as the patient is concerned, because it wears out the patient, prevents sleep, and, moreover, increases the condition which gives rise to it, inasmuch as it lets the affected parts have no rest or peace. Now, the effects of opium are both local and general; and if in muclage of acacia, or tragacanth, or in glycyrrine, or with a thick solution of confectio roseæ canina, or honey, you give frequently from the one-fourth to the one-twentieth of a grain of morphia, you not only give the patient a constant amount of rest, but you counteract the cough, where it is remediable, you tend also to cure the disease. The coughing in pertussis may be similarly relieved.

Where there is lividity of the face, blueness of the lips, etc., from bronchitis, extreme care must be had in the use of opium; or it had, perhaps, in most such cases, better not be administered; but there is a form of bronchitis, characterised by special symptoms, into which I cannot now enter, but in which, though the patient has some difficulty in bringing it up, the secretion is very abundant, and produces constant coughing—in these cases, opium, owing to its power of diminishing secretion and allaying the cough, has a very positive and decidedly curative power. And, only to mention one more instance where the use of opium is neglected, I would allude to those terrible cases of cardiac dyspnoea, where rest and sleep for more than a few minutes together are impossible, and where, as I have said, in some cases, it is impossible to get the patient to let me attempt to describe. I have seen patients allowed to go on day after day—and, worse still, night after night—in this wretched condition, and without alleviation, when a little opium would, without any danger, have relieved the intense distress, and have given the longed-for rest.

With respect to PURGATIVES, there has not been that extreme variation in practice which has obtained with regard to some other remedies; but I think, notwithstanding, that the fashion of late years has been to neglect them far too much, although in one form or another they are, perhaps, the most universally applicable, and certainly amongst the most potent and most useful remedies we possess. The abandonment of their employment is excused, one hears again and again, owing to the use of our "proclaiming" physicians. Gentlemen, I believe that few words in the English language have produced so much harm as this word debility. "Debility" seems to be the *bête noire* of the present medical world. Men speak of it as it were an entity, instead of its being, as in fact it is, an effect, a result; and it was often to counteract this state that, a few years ago, stimulants were so wildly given. It is disease which produces debility, and if these purgatives remove the morbid state, they remove the most strong and efficient cause of the most health-giving of remedies. "Talk about champagne," said Byron, in one of his letters, "there is nothing which cheers your spirits up like a dose of Epsom salts." And, in a sense, he was right. I would say, "Oh, that men did but know the virtues which reside in three drachms of Epsom salts!" Seriously, however, sulphate of magnesia is one of the best forms of saline aperients, and the old-fashioned medicine of the most experienced of our masters, the *Mistura alba*, has more cures due to it than will ever be achieved by a dozen of the new-fashioned remedies which have lately inundated the advertising pages of our journals. I say that Epsom salts have gone out of vogue, but a tacit compliment is notwithstanding constantly being paid to them, for people still find out the efficacy of the solutions which contain them, and they take our old friend in the morning, bringing away copious motions of yellow-green or black matter, such as you do not get otherwise, and one feels, after that, light, and buoyant, and bright, and with a head clear for work, a state such as one has not felt in, perhaps, for weeks before, and the Melancholy has been removed.

I am quite aware of the experiments by which it has been proven, or said to have been proven, that mercurials are not cholagogues. Well, I cannot discuss that matter here; but this I know, that a good dose of calomel or blue pill given in the old-fashioned, and followed by some sulphate of magnesia, or other good saline purgative in the morning, will bring away copious motions of yellow-green or black matter, such as you do not get otherwise, and one feels, after that, light, and buoyant, and bright, and with a head clear for work, a state such as one has not felt in, perhaps, for weeks before, and the Melancholy has been removed.

¹ A favourite formula of mine, varied according to circumstances, is liq. morphia, acetatis ʒi; acidi nitrici dil. ʒss; oxyæmule acide ʒi; mucil. acacie ʒiiss; glycyrrini ʒi; syr. rhusodii ʒi; ca. cinnaam. (vel rosæ) ad ʒvj. M. To take one or two teaspoonfuls, five, six, or seven times in the twenty-four hours.

Another good old-fashioned purgative, but out of fashion now, is cream of tartar, one of the best of hydragogs, especially when combined with two or three grains of resin of jalap, and it is a remedy, too (when given in small doses and well diluted), under the name of the imperial crutch, scarcely surpassed by any as a diuretic.

I regret not being able to refer to sundry other remedies of this class, of which I have memoranda before me; but as derangements of the digestive organs, in their various forms, constitute a large proportion of the ailments about which we are consulted in our daily practice, and are the source and root of a multitude of conditions and affections not at first sight associated with them, the field for the proper use of purgatives is extremely wide; and I think it was not wise of the compilers of the present *Pharmacopœia* not to insert in it Abernethy's celebrated *Mistura Gentiane Composita*, which existed in the editions before 1864, a well-remembered mixture which, as a part of the treatment of senile, most useful, whether given alone or as the vehicle for other remedies, and which I trust will again appear when the new edition of the *Pharmacopœia*, now about to be commenced, is published:

Such fluctuations and such changes take place in opinion and in practice in beliefs and in actions that it almost seems as if the result of the experience of ages, instead of being engraven on the rocks, were written on the sands, and that the wave of fashion, sweeping over these, at once obliterates the inscriptions which ought to have been indelible. And so at one time the laws of our country are made absolutely cruel in their harshness, while at another the sympathy of justice seems rather to protect the aggressors than to defend the injured. At such times, things connected with religion the oscillations vary by turns from one extreme to the other. And changes scarcely less trenchant, scarcely less astounding, mark from time to time the course of our own profession. Perhaps fashion, perhaps custom, may have had to do somewhat with the practice of former times as well as of the present; but I cannot believe, I do not believe, that the united testimony of centuries of our profession, for more than 2,000 years, bore witness to one continuous error, to a delusion and a lie. If there be one thing more clearly than another told by the consensus of their experience, it is that, in many cases, bleeding in one form or another has, more than any other means whatever, the effect of assuaging pain, of modifying the course of diseases and saving life. And all this I steadfastly believe.

The period of time which I have chosen for my retrospect—the last thirty-five years—pretty nearly bridges over the period when the ABSTRACTION OF BLOOD was in vogue and doubtless carried to an excess, to the present when the opposite extreme has been reached, and bleeding in all its forms, has (alas! for the welfare of patients) been almost banished from our practice. Much has been said, by way of explaining or extenuating the change, about the type of disease, or the human constitution having undergone an alteration; or about our knowledge of physiology having been advanced, or about us to look with wiser and better views upon the effects of abstraction of blood. I cannot enter hereinto the discussion of these questions; suffice it to say that clear, certain demonstration of the former is still wanting, and that, in my opinion, the definite teaching of both physiology and pathology demonstrate most unmistakably the reasonableness, in certain cases, of withdrawing blood from parts turgid from distension or distended from congestion. I much fear that the result is rather due to an unreasonable reaction from the over-bleeding of former times, and to the weak tendency of the human mind to run in grooves, and to the weaker tendency still of people to do as others do, and to follow what has become the fashion, without halting to ask themselves seriously whether a thing be right or reasonable, just or true.

It is impossible to enter fully into the proof of the decrease of blood-letting from the arm; but every medical man who has practised for the last thirty or forty years, can tell that formerly it was a practice constantly used, and every one knows that now it is one of the rarest of remedies. Formerly, there was no hospital without its cupper, and he came every day to carry out the orders left by the physician or surgeon during his daily visits, and I doubt if now there be a cupper attached to any one of the London hospitals; while the name is now no more found in the *Post Office Directory*, than is that of the Dodo or the Ichthyosaurus.

With respect to blood-abstraction by leeches, it is much more possible to get at definite knowledge; and, by the courtesy of the secretaries of the great London hospitals, at all of which I have made inquiries, I have got some very curious and interesting information, which I have tabulated. (See Table II.) Taking round numbers

in the several tenth years, from 1842 to 1882, the amount expended in leeches at St. George's was, £141, £38, £6, £2 14s., and £2 13s. 6d.; at University College, £27, £26, £10, £1 8s., and £1 17s.; at Westminster, £35, £25, £10, £2 11s., and 13s. 6d.; while at the London Hospital, in 1839, the leeches cost no less than £495, with a sudden drop in 1842 to £180, and in the successive tenth years, £34, £26, £10 10s., and £7 10s. The prices of leeches of course were very roughly speaking they may be considered to have cost the hospitals about 14d. each, so that the number used may be approximately calculated. As regards the hospitals I have, however, been kindly informed in some cases as to the actual number of leeches used. At St. George's they reached 19,600 in 1842, 4,050 in 1852, and 1,360, 500, and last year 754; while at University College Hospital they were 8,000 in 1852, then 2,000, 1,000, and 400 in 1862, 1872, and 1882, of which 1,000 were favoured by leech importations by the leading chemists of London, all tell the same tale; for instance, a most distinguished firm tells me that the numbers sold by them every tenth year, from 1814 to 1864, were 1,023, 2,830, 2,982, 2,998, 1,430, and 214 in 1864; since then they have not thought it worth while to keep an account of their leech-sale, and they believe that last year they only sold about fifty. And all this, remember, notwithstanding that the population of London has enormously augmented, and that the beds in the hospitals have been very largely increased in number, and that the general business of the chemist has greatly extended.

I beg you will not for one moment think that I advocate a recurrence to the former almost indiscriminate use of bleeding, or of any of the remedies which I am bringing under your notice. I think, indeed, that it is mainly their former extravagant and injudicious employment which has brought them into disrepute, and which I think is no argument against its use. It is but a truism to state that in order to employ any remedy rightly, a clear and accurate diagnosis as to the true nature and pathology of the case in which it is to be employed must first be made. This is the only sure foundation of any treatment whatever, and nothing can compensate for the want of knowledge, of diagnostic power, and judiciousness in the employment of remedies, with the best intentions, the best custom, and the fashion of the period; and if we bring these qualities to bear on our cases, we shall, if I mistake not, look with more favour than of late upon blood-letting in some of its forms, and find it to be one of our most potent means of combating some of the most serious conditions which we meet with in practice—a remedy of vast good when rightly used, and one to neglect which entirely is, I hold, to deprive your patients in certain cases of the only chance of recovery.

There is no doubt whatever that, in former times, blood-letting being used too indiscriminately, harm was sometimes done. But the harmful effect of even repeated bleedings was much less than, judging the matter theoretically, could have been expected, or than, with the prejudices of the present day against the system, will be readily believed. In fact, numberless experiments, so to speak, were made, and they have shown in only one instance that they were of any show at least the immunity with which repeated bloodlettings could be borne. Persons were in the habit, especially in some parts of the country, of being bled year after year to considerable amounts; and not only were no injurious effects observable, but the people (and, in such matters, their feelings count at least for something) declared that they felt better, were stronger, and worked better after the blood-lettings than before them. I think, therefore, we ought to pause before rushing to the conclusion that the disuse of bleeding in its various forms has been the result of philosophically observed and well ascertained proofs of its injuriousness. I fear we must attribute the change of practice to causes far less creditable—to that oscillation from one extreme to the other in things medical, as well as in other things, to which I have a moment ago alluded. I have, for example, seen a man who had been bled to a very trenchant impression than do general statements; and I beg, therefore, to give you an illustration of what I am saying, which will, I am certain, interest you. As we are all friends here, let me introduce to you, gentlemen,—at least, to those of you who have not already the pleasure of his personal acquaintance—my good friend Mr. H., who has done me the honour of coming to hear what I have to say to-day. I am permitted to tell you that he has turned his threescore years and ten, and you see what a fine, handsome, and hale specimen of humanity he is. He is a good example, if not of the judiciousness of former practice, at any rate of the endurance of human beings under extensive and repeated bleedings, and (I need not say) of the survival of the fittest. After violent exertion in the early morning, one day in the summer of 1829, he had a fit, and fell suddenly off his chair while at breakfast, exhibiting slight

spasmodic action of the muscles during the day; for this he was that day bled three times (that is, the bandages were removed), and twenty-four leeches were applied; on the next day (Sunday) he was bled twice; on the Monday twice; on Tuesday once, with the addition of twelve leeches; and on the Thursday once. Soon after his recovery, he was sent to his home in the country, where, on the 18th he was bled to thirty ounces; on the 19th, he had another bleeding and twelve leeches; and the bloodletting was repeated on the 20th and 21st. Thus he was bled nine times, and had thirty-six leeches applied within six days; then, a short time afterwards, he had four bleedings on four consecutive days, and twelve leeches. A month subsequently (in the October) he was sent down to the house of a surgeon in Exeter, on three successive days, was bled altogether four times and had twelve leeches. In March of the following year, 1830, he went to Edinburgh, and in the month of August he was again attacked under somewhat similar circumstances, with very similar symptoms, and moreover with absolutely similar treatment; for on the 30th he was bled twice, and once daily on each of the six following days; and, adds our friend, "during that year I was bled occasionally, but do not think I have been bled once since the commencement of 1831." Twenty-five bleedings (without counting the "occasional" ones subsequently, or reckoning the four dozen leeches) in the short period I have named, testify to a wonderful promptness and "activity" of practice; and, whatever we may think of the treatment itself, the fact that our friend has since remained strong, vigorous, and active, has enjoyed sports, and has gone through a long life of the fatigues of general practice—these things, I say, clearly establish the fact, that the practice of bloodletting does not necessarily, even when used to extreme amounts, produce the "weakness," the "debility," or the "prostration" attributed to it without evidence by the timid do-nothing views of the present day. I neither counsel, nor defend, nor approve of such wholesale blood-letting as that to which I have referred; but I earnestly beg you to take to heart the lesson which it helps to teach, and to see that the treatment is not excessive, and that no injury, but may, as I am certain it does, in right cases do immense good.

The names given to diseases occur, unfortunately, but a very small amount of information relative to their precise character, their gravity, and the treatment best suited to them; and in pneumonia, for example, we have a disease which, according to its variety, the constitution of the patient, the stage at which we see it, and its complications, requires treatment of widely and apparently opposite modes of treatment. But in the strong plethoric individual, where the attack comes on suddenly, where the breathing is intensely oppressed, the circulation greatly embarrassed, the pulse hard and full, I believe that a bleeding in the early stage is of high value. In some cases, it appears to diminish the duration of the attack, and without a shadow of doubt it gives immense relief to the patient, whose breathing is thereby rendered comparatively free, the pulse becomes greater and softer, and the pyrexia is diminished.

In very acute pleurisy, too, when occurring in similar subjects, the abstraction of blood is often speedily followed by immense relief to the dyspnoea, and to the agonising pain; and I have seen such relief occur, accompanied with the most grateful expressions from the patient, while yet the blood was flowing from the vein.

In these cases the abstraction of blood is founded on the belief, on true physiological principles, and it is often highly useful. But there is another class of cases in which the right heart is engorged with blood, and in which the only hope of rescuing the patient from death is by bleeding. A man of middle age (I again draw from nature) has considerable chronic bronchitis, with some congestion of the lungs, and, like many other unwise persons, he goes to a southern watering place in the month of June, and remains in that place, in a uniform temperature. Becoming worse, he determines to return home, and travels on a cold spring day; his dyspnoea is so much worse on the journey, that his friend and the fellow-passengers doubt whether he will arrive home alive; and when his carriage meets him, it is with the greatest difficulty he is conveyed to his house, and got into his drawing-room. You are at once sent for, the message being that the patient is dying, and when you arrive you find that that is the fact. He is sitting in a chair (to lie down is impossible for him), his face is blue and swollen, his lips purple, the eyes suffused and staring, his heavy gasping breathing you have only too distinctly heard and recognised as you ascended the stairs, and when you see him you find his chest heaving, and each short gasping inspiration followed by a long wheezing and moaning expiration; his lungs are full of moist sonorous, and mucous and subcrepitant rhonchi, and scarcely a trace of vesicular respiration is to be heard, and he is

pulseless. He looks to you beseechingly, and gasps out, in scarcely articulate words, that he is dying. This is but too true. Now, the treatment for such a condition at the present day is "to pour in stimulants" (though the patient can scarcely swallow). Brandy and water are given, and ammonia, and perhaps ether; then, if the patient still refuses to have them made, mustard and poultices are applied to the chest, and to the calves, and to the feet, and the patient is fanned, and the patient dies. Something has been done, but that which true pathology—and, indeed, common sense, unshackled by prejudice, custom, and fashion—would dictate, has been left undone. Appearances have been saved but not the patient's life.

The fact is, that here the danger lay in the right side of the heart being gorged with blood, and in the fact, that the blood, before it was discharged, had to contract and to propel forwards the thick and blackened blood. Oh, as you value your patient's life, as you value the blessed consciousness of being a minister who has done everything possible for his welfare, let me beg of you not to be contented with the futile treatment of to-day; relieve that poor oppressed distended heart, and all may be well! Open one of those veins which are, with every systole of the heart, tending to carry more and more blood to this already distended right ventricle, and all may yet be well with your patient. Sometimes this blood-letting, in extreme cases, is no easy matter; it may be necessary, before you can effectually open the vein, to place the patient's arm in warm water, so as sufficiently to distend the vein; and even when the ligature has been efficiently applied, and the vein well opened, you may have to press and squeeze and rub upwards the arm, before a sufficient amount of blood will flow out. But, when it does flow, at length freely, oh, what a marvellous change may you see take place!—the breathing becomes quieter, deeper, and less noisy, the haggard face resumes the appearance of tranquillity, the blueness of the skin is replaced by a more natural tint, the pulse becomes more and more distinct, and, in a word, the choked up life is set free. This is no fancy picture. Every word is simple truth, and I appeal to the confidence of the heart, and to the memory of every student who recollects the experience of his earlier days, and who can also probably tell you that the after-progress of such cases was sometimes almost miraculously rapid, so that in a few days even the patients might become convalescent. The younger members of our Association lack not the courage to do right when they know what right is; and I trust that I shall live to see many of them put on record graphic results of a kind which I have been able only briefly to sketch out.

I must pass over other diseases and conditions in which some form of bleeding is useful, just naming the general plethoric condition of the system about which we are sometimes consulted, and which has only threatened, but not as yet produced, any definite disease. I must pass these over, I say, to refer to a group of diseases in which this remedy is often of the highest good, if the symptoms be correctly interpreted, but in which the distended heart, bleeding well, to a certainty, aggravate the conditions, and in which the diagnosis is sometimes exceedingly difficult; I allude to the large class of affections of the head.

There is not a shadow of doubt that "coma, convulsions, and paralysis may all occur independently (as Dr. Todd says) of hyperæmia or of inflammation; and if brain-irritation be mistaken for an inflammation, and the system be bled, the result, in the consequence, no doubt a grave error will have been committed, and a grave injury done to the patient. And the same is the case if a congestive condition be ignored when it really exists; a grave injustice is done to the patient, and chronic suffering is allowed to continue which in all conscience ought to have been removed. Quite recently, a patient of mine, in giving a history of his case, said that, "from the first, I was aware of the organ, but I did not know it ached, which were frequently so overwhelming, notwithstanding the supposed best treatment, as to render him quite incapable of attending to his business. At the end of that time, he was cupped at the nape of the neck freely; and," said he, "from that day, and it is now eighteen years ago, I have never known what a headache is."

Nature, indeed, seems to me in this, as in some other things, occasionally to point out what is the best mode of relief; and, as the speaker in unmistakable language when, by a copious epistaxis, she efficiently relieves the congested turgid face, the beating temples, the dull heavy headache, the sleepiness, the confusion of thought, and other symptoms, which, in a plethoric individual, be-token, if they are not relieved, serious danger, or perhaps an apoplectic attack. Let us not neglect her lesson!

But there are some cases which are on the very border-land of doubt, and concerning which those who are fully alive to the value of leeches may hesitate and differ. A girl aged fourteen—going a little bright, but of somewhat nervous temperament—overworked herself with lessons at school, and with lessons at home, which she had no need to do. After being somewhat ailing for a few days, during which she made little or no complaint, but continued her school duties, she came home one afternoon, about the middle of November last, with extremely severe, oppressive, dull, heavy pain, occupying the whole head, especially severe in the brow, and extending a line corresponding with the base of the brain. The temperature was but slightly raised, but the pulse was notably quickened. She was somewhat excited; grasped her head with her hands, and declared that it would burst. Yet there was no great throbbing of the temporal arteries; the eyes were not at all suffused; and the face was but little flushed. I looked upon the case as one of considerable cerebral congestion, rather passive than active, and certainly not acute, from over mental work, and the anxiety dependent upon a school-girl's desire to excel. She was put to bed; evaporating lotion was applied to the head, and salines and aperients were given. No improvement occurred, and the pain continued without the slightest intermission; and, therefore, a few days later (on November 17th), I ordered four or five leeches to one of the temples, but, unfortunately, only two of them took. A slight, but only slight, relief to the head was given. On the 18th it was that the girl had experienced. Seven days after, I applied four leeches to the other temple; these bled very freely, and from that time the patient lost the vertex headache, and she was able to leave her bed; but the pain along the base of the brain continued without a day's intermission. During the ensuing thirteen weeks, she was kept away from school and from all head-work, and she was seen by three most distinguished Fellows of the Royal College, to each of whom I related the particulars of the case, and what had been done; but they did not one of them thought a further application of leeches desirable; they might have been all very well, they said, when I prescribed them, but each one said he should not like to advise their further use. Bromide of potassium, and, subsequently, bromide of ammonium and several other remedies, were ordered, and notably the frequent steeping of the arms and feet in hot mustard and water, besides other forms of counter-irritation. The patient, however, was fully carried out for the thirteen long weeks which I have mentioned, and for all that long time was the headache absolutely persistent; whenever the girl was awake, there was her heavy headache. At the end of this time, I determined to act on and to carry out completely my own views. On February 17th, therefore, five leeches were again applied to one of the temples, and, somewhat after, the same number was repeated. The first of these applications gave the first relief the patient had to the coronal pain which had so long been her persistent companion; but, though greatly relieved, it was not cured. The second of these applications (the fourth of the series) entirely removed it; and the girl, once more bright and cheerful, returned to school, and has not since been an hour absent from her duties.

—Is precise, the passive condition of the congestion in this case the absence, that is, of acute symptoms—and the further fact, that the girl was of anything rather than of a plethoric temperament, which gave force, and point, and interest to the plan of treatment which proved successful. Had the symptoms indicated any more acute action going on within the encephalon, my excellent *confidés* would doubtless have concurred in the abstraction of blood, but nothing of that kind existed; and yet, here, four times only, during the long period of continuing headache, did the girl get any notable relief; and, in each of the four times, it was after the application of leeches—the last of these occasions effecting a complete cure. I verily believe that, had I boldly carried out my own views earlier, much pain would have been prevented, and the duration of the disease would have been, some weeks before, cut short.

It is impossible for me, in this place, to attempt to discriminate in detail the various heads of leeching in which the abstraction of blood may be useful, nor may I even stop to enumerate them; all I can do is to draw a few broad outlines. I have just sketched a case of one form; but did you ever see the flushed face, the wild and glistening eye, the knitted brow of simple acute meningitis? Did you ever hear the piercing delirious cry arising from the house, caused by the unutterable pain and agony of that disease? And have you seen, as a result of leeching, a face gradually drawn away the blood, a calm tranquillity gradually stealing over the face, and the drooping eyelids gently closing over the recently staring and throbbing eyeballs? Have you heard the wild cry, as the blood is

being drawn from the burning brain, subsiding first into a gentle moan, and then into a series of still gentler sighs, ere the leeches have dropped the temples? If so, you have heard music sweeter than musician ever dreamt of, and, standing at the bedside you must have said, as I have done, "Thank God for His great blessing in having given us leeches!"

Allow me just to remind you of another of my friends greatly neglected of late—somewhat of a relation to the one to which I last referred. In this case there is no question as to removing blood from the body; but we have in it—in DRY-CUPPING—one of the most rapid and powerful means of removing somewhat deep-seated congestions and hyperæmia, and of alleviating or curing certain pains and conditions which are far less efficiently treated by liniments, and by other forms of counter-irritation. In cases of head-congestion, with dull heavy pain and vertigo, where other remedies have failed, and where you do not think the abstraction of blood either desirable or requisite, dry-cupping to the nape of the neck will not unfrequently give great and immediate, but permanent relief. The stitch of slight pleurisy is now relieved by it, and pleurodynia and certain renal pains, and especially sciatica. But its effect in some cases of lumbago is really striking. With that looseness of language which is, I think, far too common amongst us, we constantly hear lumbago spoken of as a "rheumatic" affection. Rheumatism may doubtless affect the lumbar muscles; but that ordinary attacks of lumbago, or the similar pains which affect the interscapular and other muscles, have anything to do with rheumatism, properly so called, I beg to deny. It does not occur at all frequently, or specially in those who suffer from true rheumatism; it often occurs in those who never had an attack of general rheumatism, or even a pain in a single joint; it is not associated with effusion, and the urinary system is not usually affected by it, and its cessation often, are utterly unlike those of rheumatism, for the latter usually comes on and ceases slowly, while the onset of lumbago is frequently instantaneous, as from an awkward position or strain, etc., and its termination almost as rapid; and, finally, dry-cupping will sometimes cure lumbago as by magic, while I would have a sorry chance, I fear, against rheumatism. A man, for instance, previously feeling perfectly well, is seized while putting on his coat, with a pain which grips the lower part of the back like the clutch of a tiger's paw; to stand up or to move one iota from his chair, becomes an instant impossibility; the pain, liniments and frictions and hot baths notwithstanding, may thereforwards last, though modified, for days or more. Hot-ironing the part is an excellent remedy; but dry-cupping over the affected muscles sometimes achieves a miracle—the patient can forthwith get up, march, and attend to his work.

Gentlemen, I have finished. I have left unsaid many things I wished to say, and have said far more imperfectly than I intended many of the things to which I have alluded. I do not like to have to make apologies for shortcomings of this kind, because I hold that, whatever one undertakes, one ought to find time and opportunity to do it well; and I may be sure that you will be glad that most important matters, altogether unexpected, and altogether beyond my control, have of late occupied my time, especially during the past week or two, and I have not had even spare minutes to revise this address as I should have wished; and I regret this the more, because the imperfections in my mode of bringing these subjects before you may have marred the impressions which I desired to produce. When the tide of opinion runs strongly in any given direction, it requires some moral courage to appear in public, and boldly to oppose it, especially when that opinion is supported by men of profound thought and great power of mind. But deep conviction engenders boldness; I have survived the period when I was considered unorthodox in practising without giving, and in speaking and lecturing against the administration of stimulants; in almost every form of disease, and in almost every case, I have given my conviction, and not less strongly as regards the advantages to be derived from the right and judicious use of the remedies to which I have been referring, than they were with respect to the evil produced by the indiscriminate use of alcohol; and, entertaining vividly these convictions, I should be unworthy of the position with which you have honoured me, if I had hesitated to express and to enforce them. It is for you, gentlemen, to consider the suggestions I have made; to call out what may appear reasonable; to put them to the test of experience; to alter and modify your conclusions accordingly, and so to guide your practice; and if, as I trust, at least some slight modification of treatment may ensue from the words I have spoken

here, tending to relieve pain, to shorten the course of disease, or perhaps to prolong life, I feel that, even when I have guessed away, I may still be, in a sense, a fellow-worker with you in the cause of humanity; and once more I thank you most sincerely for having been given, by your kindness, the opportunity of expressing my views from the high and dignified position of your presidential chair.

AN ADDRESS

OR

THE CLIMATIC TREATMENT OF CONSUMPTION.

Delivered at the Annual Meeting of the South Eastern Branch.

By FREDERIC BAGSHAW, M.D., M.A.Cantab., F.R.C.P.,
Physician to the Hastings Infirmary; President of the Branch.

GENTLEMEN.—It is no light matter to assume this chair, and enter on the duties of a post which has been so ably filled by my predecessor in office, to whom I must tender my best thanks for the kind way in which he has introduced me to your notice.

On the last occasion when this Branch of the British Medical Association assembled in Hastings, now fifteen years ago, its president was Mr. Ticehurst, a man whose sterling worth was fully appreciated by the whole townsmen, by his brethren in the Association, and by the whole body of the medical profession in this part of the country. Full of honours, he has passed to his rest; and, now that the post of president has again to be filled in Hastings, the loss will again be freshly felt. To-day we deplore a recent loss among the foremost ranks of the profession. It is but few weeks since Jardine Murray filled the post of chairman of the South-Eastern District at Brighton. Devoting his great energies to the alleviation of others' suffering, he was forgetful of himself, and fell a ready prey to the onslaught of acute disease.

The subject on which I propose to make a few observations is the climatic treatment of consumption.

The received views with regard to the climatic treatment of the most steadily fatal of all diseases, tubercular consumption, have been undergoing a series of changes. The day is not long past when, emerging from the treatment by confinement in warm rooms, and the application of various remedies intended to subdue the inflammatory conditions of the disease, it became the custom to send phthisical cases to such warm and relaxing climates as Pau and Andernos. The system had its day, to be succeeded by another, equally doubtful in its ultimate application. The warm and dry climate of the Mediterranean coast, Egypt, and the Riviera, came to be considered, both by the profession and the public, as the natural antidote to tubercular disease.

The climates of the Riviera are so well known, that it would seem unnecessary to enter minutely into their conditions. In frequent instances the object is to attain, in this southern latitude, some 800 miles to the south of our own, a climate which shall reduce the rigour of the winter season, and place the sufferer under conditions nearly approaching those of our own summer. The average winter and spring temperature of the Riviera exceeds by about eight or ten degrees that of our own country. In common with Alpine climates, their chief features are their dryness and sunniness, and the exalating property of the air. In contrast with them are their warmth and the greater or less degree of humidity of the air. That the chief advantage to be derived depends upon the fact that, under their influence, it is possible for the sick during the winter months to spend more time in the open air than can be secured in the health-resorts of this country. It is not alone to its southern latitude, and to the direct influence of sunlight, that the Riviera owes its warmth. Placed with a full southern exposure, it is washed by the Mediterranean, whose waters are estimated to have a mean excess of nine degrees over that of our own southern shores. The rush of cold air coming down south from France and Switzerland renders such places as Montpelier liable to extreme alterations of temperature. Along the Riviera protection is obtained from the severity of these winds, which, passing over the lofty chain of the Maritime Alps, strike the sea at a distance of many miles. It is true they are often reflected in currents of various intensity, even along the

sheltered coast-line, giving rise to a great variety of local winds. Even in the finest winter weather these dry and cool northerly winds prevail invariably at night, while southerly breezes occupy the daytime; but it is to the former that the bracing character which these climates present is to be attributed. It will appear then, that, while the Riviera enjoys great advantages from a warm southern exposure, and from the influence of a warm inland sea, it partakes largely of the character of the continental climate of Europe; and herein it stands in contrast with insular climates, whether southern ones such as that of Madeira, or northern ones like our own.

It is especially for the sufferer from lung-diseases that the stations on the Riviera have won their great reputation, and their claims hold good chiefly on account of the lessened liability to the recurrence of catarrhal conditions.

Morbid products in the lungs, whether dependent on tubercular infiltration, or the result of inflammatory deposits, and of unduly extent, are dangerous and progressive almost in proportion to the frequency and severity with which irritation is set up in the surrounding tissues; and, conversely, amendment and absorption are likely to ensue in proportion as the surrounding lung can be preserved in a state of health. Again, while the avoidance of catarrhal states is so important a factor, a no less important one is the improvement of the general nutritive state, and is promoted by pure air and improved digestive functions. In those cases which are thus liable to irritation of the mucous tracts, whether of the air-passages or of the stomach, under the application of the stimulus of cold, and in those where the circulation is feeble, and localised congestions are readily set up, the climate of the Riviera is suitable.

Cases come under observation in which the return of the autumn cold and damp brings on fresh attacks of disease, and in which which have been lying quiet during the warmer months; and these, removal to the Riviera year after year has been the means of alleviating this condition, and, year by year, arresting any further damage. The gentle stimulation of dry air and sunshine is grateful, where the extra stimulation of cold and rarefied air would be intolerable. An individual advanced in age, or lowered by disease or overwork, or by general constitutional causes of debility, living at so low an ebb as to be depressed by the cold of a winter climate, recovers under the influence of moderate heat and stimulus.

But just as, with the vegetable creation, the forcing process renders the plant more susceptible to cold, so the patient who winters in a warmer climate, on his return home, becomes more sensitive to change. Winters abroad must be followed by summers spent on the mountains, or, still better, in northern home-climates, if we would avoid permanent feeble effects from a sojourn in the south.

Here it may be observed that the south-eastern coast of England not only provides a convenient and suitable halting-place to those who are returning home after a winter spent in the South of France, and who dare not venture to the colder parts of England until summer weather has set in, but also that the climate proves itself to be well adapted for a summer residence. In contrast to the Riviera, it is found to be sufficiently bracing for many of the more delicate sufferers from lung-disease.

Again, constitutional nervous irritability is alone a reason against sending patients to these climates. Where irritative fever is present as the result of disease, in whatever stage, whether of deposit, of active softening, or of cavity, no remedial influence is to be expected. Such cases have seemed to me, during four winters' residence in the south, to deteriorate more rapidly than is usually experienced in England. When, however, arrest has set in, and the fever subsided, extension of deposit or softening has ceased, or the system has shown signs of toleration of a cavity, the case is different. Change may then be beneficial.

It has been set forth as one of the inducements of the South of France that residents there avoid east wind, and thereby escape the dangers of intercurrent pneumonia, so far forth. In my experience, the *mistral* or the *bise* is equally to be feared as the fever disease, is often greater than that of any ordinary north-east gale in this country. Intensely dry and irritating in itself, it is rendered more so by the dust-loaded atmosphere which it creates, and which penetrates everywhere. From a steamer in the Bay of Nice, I have seen the towers enveloped in a cloud of fine dust nearly three times the height of the houses. No wonder, such an atmosphere gives rise, as I have seen it do, to hemoptysis, as well as to all the acute symptoms. I believe hemoptysis to be of more frequent occurrence in the South of France than it is in this country.

It is especially at such times of *mistral* that irritative dyspepsia is prone to arise. It is often accompanied by nervous irritability