Some pharmacentists consider that it is solely composed of two resins; whilst others maintain that besides the resin which forms the greater part of its bulk it contains four other distinct resinoids, an alkaloid, and a neutral substance. The pure resin (the podophyllin of Mr. John Lewis) is said, when given pure, to produce sickness, hypercatharsis, and great griping; while to the other principles it owes its cholagogue, eliminative, and alterative properties; and it is alleged that the latter greatly and beneficially modify the action of the pure resin, and that the full therapeutical advantages are only to be obtained by the use of the compound. If podophyllin is prepared in this country, it is necessary to be extremely careful to obtain the root properly and recently dried. The fresh root, being too acid, probably loses some volatile and offensive matter by drying; whilst if kept too long, it undergoes such changes as not to yield all its active principles to alcohol.

Podophyllin has been very extensively employed in America since the year 1847. Dr. John King, of Cincinnati, however, claims to have been acquainted with it, and to have used it in his practice, as early as 1835. He gives the credit of the recognition of the properties of the *Podophyllum peltatum*, and many other American indigenous plants, to Dr. Tully, formerly professor in Yale College, Connecticut. The practitioners calling themselves "Eclectics" have written on the subject so extensively, and attributed to it such remarkable and valuable therapeutic properties, that their testimony might seem to be overstated and almost fabulous, did we not find sober minded and scientific physicians equally enthusiastic on the subject. The sum of the expressed opinion of both parties is, that it exercises an influence on the human constitution, and is remedial in as wide a range of diseases as mercury, without having any injurious effects whatever. The primary actions they attribute to it are—emetic, cathartic, cholagogue, generally eliminative and therefore diuretic, diaphoretic, emmenagogue, sialagogue, &c. Hence it is powerfully alterative, capable often of arresting fevers by a single dose; of removing congestions of the brain, lungs, liver, or spleen; of reducing glandular enlargements; of affording great relief in inflammations of almost every organ; of curing rheumatism, jaundice, croup, habitual constipation, amenorrhœa, and, in minute and long-continued doses, many skin diseases, and even syphilis and scrofula. It is regarded as almost a specific in all disorders of the liver; as indispensable in all fevers—intermittent, remittent, and continued, but particularly puerperal; as valuable in pneumonia, bronchitis, and phthisis. Not only, say they, is it capable of effecting everything that is expected by the agency of mercurial preparations, but it is beneficial far beyond them, and in diseases for which they are inapplicable. Apologizing for thus extolling a remedy so recently discovered, beyond one which has been in the hands of the profession for ages, and the reputation of which is established beyond controversy, they nevertheless maintain that their eulogiums are based upon sufficient and careful observation. Were we to quote the authorities for all this to be found in the medical literature of America, we should be compelled to extend this notice far beyond the limits allowable in the pages of a periodical; and we therefore deem it better, and we trust it will be regarded by our readers as more satisfactory, to produce the experience of practitioners on this side the Atlantic, who have for a long time employed podophyllin, confining our quotations to one or two notes relative to the manner of its administration. First observing that a correspondent of an American journal states that he has treated with complete success one hundred and twenty cases of syphilis with this medicine alone. The general statement of its being curative of this disease is made by many authors; and although we have no precise evidence on the point except the above, we have reason to believe that podophyllin has found its way into the hands of several irregular practitioners in this country, who use it as a substitute for mercury. We would therefore commend it to the attention of gentlemen who have opportunities to verify or refute the allegation. 1. It is said that the purified resin of podophyllum, improperly called podophyllin, is escharotic, producing, when applied to the skin, small pustules which are difficult to heal, and internally giving rise to extreme griping and violent catharsis. 2. That chloride of sodium given with podophyllin increases its purgative action to an undesirable extent, and should therefore be avoided, except in cold phlegmatic habits where the action of the drug is feeble. 3. That lactic acid counteracts its operation; and that sugar, sweet-meats, pickles, and like substances, should be avoided when it is administered. On the other hand, many writers recommend it to be well triturated with four or five times its weight of fine sugar. 4. That its use should be avoided in inflammatory states of the stomach or bowels, particularly of the mucous

lining of the primæ viæ. 5. That a warm infusion of ginger is the best means of relieving tormina and griping when caused by its use. 6. That for an overdose, sour milk, whey, or any form of lactic acid, are the best remedies. Lastly: That as a purgative, bitartrate of potash, twenty to thirty grains, is the best adjuvant; while when given as a cholagogue or alterative, it is well to combine it with minute doses of extract of belladonna, hyoscyamus, or cannabis indica.

The doses of podophyllin are from one to three grains as a cholagogue and cathartic; half to one grain as a moderate purgative; one-fourth to half a grain as an aperient; a sixth to a quarter of a grain, three times a day, as an alterative.

(To be continued.)

Correspondence.

"Audi alteram partem."

THE INFLUENCE OF RAILWAY TRAVELLING ON PUBLIC HEALTH.

PERSONAL EXPERIENCES OF AN HABITUAL TRAVELLER.

To the Editor of THE LANCET.

SIR,—I am desirous of adding a few observations on the important subject of the Influence of Railway Travelling on Health, to which you have recently so emphatically directed attention. I feel privileged to do so, because the first time the subject was treated before a professional audience in this country was on the occasion of my reading a paper before the Brighton Medico-Chirurgical Society, in the autumn of 1860, "On the Effects of Railway Travelling on the Nervous System." I then intended to pursue these investigations, but was prevented by other occupations, and am now glad to perceive how thoroughly and impartially the subject has been considered in your columns. My own observations are founded on a series of very careful inquiries, and a long individual experience of travelling on different lines. I need hardly say that very many remarks I had jotted down, and which were then original, have now been embodied in your exhaustive examination of the subject. The following comments (which have doubtless occurred to many other travellers) I now forward, as some of them have hitherto received but very brief notice, yet appear to me of much importance when considering the question of comfort in travelling, for continued discomfort avowedly influences health injuriously.

The different effects produced on individual travellers vary more, I believe, according to their nervous disposition and their intellectual culture, than according to their physical strength and daily occupation. Then, however interesting may be statistical information as to the health of railway and post office employes, public interest must necessarily centre most on the influence produced on those who are of the public—that is, travellers of different grades and various dispositions. Thus the stout, easy going, lethargic traveller, I notice, bears continuous locomotion far better than the spare, nervous, irritable man. The following case illustrates this remark. It was communicated to me whilst making my original observations.

The subject was a gentleman of high position in the City, thin and impressionable, and about the middle age. The first effect he noticed from railway travelling was a shaking of his hand when taking lunch—a symptom only observed after a railway journey. During the transit he suffered from headache of a dull, heavy kind, and felt dizzy and unable to collect his thoughts, being "all at sea" for some time, and unequal to decide on matters of business. His muddled state he described as peculiar, and stated that none of these symptoms arise when he sleeps in town and goes quietly to business. Neither sleeplessness nor convulsive twitchings ever troubled him. Is a very moderate drinker. As a consequence of the above feelings, he gave up his daily travelling to Brighton. To use his own

words, he thought he should become mad if it were continued. He told me that he knew persons who sat down and cried when thinking of the trip before them. Has himself, after his journey, sat down to dinner without clearly knowing, or much caring, what passed around him,—all seeming in a whirl.

As such individual details as these seem to me important, I venture to add the particulars of a second case, in which I had also the opportunity of verifying the exactness of the description. It was that of a surgeon who travelled daily to and from Brighton during the month of August, and has repeated each autumn the plan of thus living away from town. For the first two or three weeks of his travelling the effects are only slight, but from the time of their first occurrence the ill effects gradually intensify. The symptoms are pain and heaviness in the head, or as though a piece of whipcord were tied round it; with singing in the ears—a humming noise (to which the patient had not been subject previously)—continuing for some time after returning home and commencing business; the sensations of shaking experienced in the railway carriage continuing still to be felt: and though these symptoms passed away in an hour or two, taking at lunch a glass of sherry or a spoonful of brandy with water led to a recurrence of the sensations on the return journey. The above symptoms were attended with temporary irritability of temper, sleeplessness at night, and convulsive twitchings of the extremities during sleep. These all ceased as soon as the daily journeys were given up.

I believe that a very important consideration for habitual railway travellers is the diet ordinarily taken. The results of my own experience are, that if I require to travel daily by rail, I must carefully restrict and regulate my diet; any want of precaution in this respect making itself surely felt after the next succeeding journeys. I have also noticed (and this has been confirmed by other observers) that many of the symptoms may be avoided, and much of the uncomfortable feeling after a journey thrown off, by making it a rule to walk at least some part of the distance towards the place of business on leaving the train, thus avoiding as far as possible the motion of close carriages or cabs; for I have often heard of symptoms—very similar to those experienced by susceptible people after railway travelling—complained of as the result of being in broughams, rolling all the day through over London stones—a condition habitual to many hard-worked medical men. The following observation is, I think, suggestive, and fully endorses the excellent remarks already made in the reports as to the injurious effects produced by watching through railway windows objects as they are passed:—

One frosty morning when travelling to town I was struck with the peculiar comfort of that particular journey when compared with that of other days. Now, on this morning the windows were covered thickly with hoar-frost, and objects without were invisible, and to this I certainly attribute the comfort all in the carriage experienced. Whether ground glass in the side panes of the carriages might not be advantageously used is the suggestion I should found on this observation.

Lastly, there is one point on which exact information is of great importance, although it must, I fear, be unattainable. I refer to the distance per diem which an ordinarily healthy person actively engaged in professional or business pursuits might venture to undertake to travel over twice daily. I do not here allude to the capabilities of those whose business or amusement is travelling, but rather to the well-to-do professional persons, who, being able to afford a temporary or permanent sojourn in the country for their families, so frequently ask their medical attendant at what distance down the line they may take up their residence. My own individual experience, having specially noticed the more striking effects of railway travelling, is, that I can for a long time undertake twenty miles a day each way on a well-laid line, taking precautions as to diet, &c., doing this distance in forty minutes; but I would not venture so long a daily journey were the line notoriously bad, the carriage very shaky, or the speed excessive.

I am, Sir, your obedient servant,

Queen Anne-street, Feb. 1862.

WILLIAM ACTON.

SECONDARY EFFECTS OF RAILWAY ACCIDENTS.

To the Editor of THE LANCET.

SIR,—In my communication on this part of the inquiry, I omitted an important case that I now send for insertion.

On the 8th of September, 1860, a mail guard was travelling in charge of the bags. The rails were very greasy from the weather, the engine was partly disabled, and the breaks not

acting properly, the train could not be stopped in time, but ran rapidly into the Truro station, and came in contact with some trucks standing at the platform. The guard was thrown down, his head coming in contact with the floor. *He complained only of headache*, but continued his duties, which he did not give up till the 31st of October. The pains in the head became then so severe that he was compelled to have recourse to medical advice. From this date he continued to get worse, with premonitory symptoms of paralysis of the right side and softening of the brain showing themselves. On the 13th of February, 1861, he was taken much worse, and the right side of the body became quite paralysed. On the following day he died of apoplexy and paralysis. An inquest was held on the body, the verdict being to the effect that he died of concussion of the brain, from an injury experienced on the 8th of September previous, in the collision at Truro.

This case is remarkable from the facts of the comparatively slight primary effects of the injury, of the poor man having been enabled to continue at his work for the long period of seven weeks after receiving injuries to the brain which eventually proved fatal, and from the length of time—upwards of five months—that intervened between the injury and the death.

The history of this case is of great importance in a medico-legal point of view.

I wish also to state, that I was mistaken in saying that only one fatal accident had taken place amongst the travelling staff of the Post Office since I had held the appointment of medical officer to the department. The case alluded to was the only one that I attended, and the only one with which I was acquainted at the time of making the report.—Yours &c.,

WALLACE LEWIS, M.D.,

Medical Officer.

February, 1862.

A GUARD'S GRIEVANCES.

To the Editor of THE LANCET.

SIR,—As I saw that you were writing about Railway Travelling, I have been reading your journal for the last month, and I think what you have said about over-travelling is very true. The report of Mr. Bridges Adams we all thought very good, and if the companies would pay more attention to what he said, the trains would work easier, and we should all ride more comfortably.

In your number of the 15th February I saw a letter from Mr. Grosvenor, the Secretary of our Society, and I think he is quite correct in saying that that conductor was killed by his journeys, for I knew him very well; and there are others who are nearly as bad from their over-work. Now, Mr. Grosvenor says he thinks the getting out of the vans at the stations is rather a relief, as if guards could sit down all the way like a passenger. Now, I can tell you, Sir, the duties of a guard, from the time he leaves his home till he comes back again, and then you will see how long he has to sit down.

We have all to be on the platform an hour before the train starts to see the train made up all right; then we have to go to the parcels' office to get the way-bill, and then to load our vans with the parcels. Then there is the passengers' luggage to get in, and to see the passengers into the right carriages. When we start, then I have to stand in the van sorting parcels, as well as I can, by the light of my lamp, which is under my arm, so that the smoke gets up into my face, and sometimes turns me as sick as a dog. It will take an hour at least to sort the parcels we bring from town; but then, at each station, there is a fresh lot thrown in; and so you go on. Of course we cannot look out for signals while we are sorting, and so we trust to the driver; and if he whistles we clap the break on sharp without knowing what for. Well, then, we have to carry mail-bags in our van, and mind and deliver the right ones, so that it wants sharp looking after; and, until quite lately, we used to have to carry all the business letters of the line, and I have had as many as 6000 in one journey.

Now, Sir, you see we have no long time to sit down; and it was hard work enough before, but now they are trying to make two men do three men's work it is worse than ever. We are doing 400 miles a day for a week together every fourth week, and in the other weeks they get eleven hours a day out of us; and I can tell you, Sir, that it is knocking us up as fast as it can. I know some tremendous accident will happen some day soon, and then the jury will find out that the driver and the guard were asleep; and whose fault will that be? The drivers are being made to work eighteen hours some days, which is more than any man can do.

I am, Sir, your humble servant.

A GUARD.

February, 1862.