the blood which constitute the true pathogeny of this anæmia of girls.

Now, it is necessary to ask if this alleged cause of the malady is adequate to the explanation of it? Well, it has been shown by Bouchard, in his lectures on Self-intoxication in Disease, that the poisonous activity of human fæces, even in healthy men, is very great. And he concludes that there are formed throughout the intestines of an adult in twenty-four hours a quantity of alkaloids, which, if excretion were stopped and all were absorbed, would be sufficient to destroy life. It is, then, impossible to doubt that poisonous alkaloids are formed in the alimentary canal; that when excretion is seriously diminished they must be in some degree absorbed; and that, mixing with the blood and entering the tissues, they must produce some sort of injurious effects determined by the rate of absorption and the amount absorbed.

And here arises the crucial question of this communication. Can any sufficient collateral proof be given that fæcal retention is not only adequate to explain the phenomena of this disease, but also that it is the true cause of it? Yes, there can, through an exposition of the means of cure; for the treatment which most speedily and effectually cures this disease is a treatment which by the use of tonic aperients produces full and regularly recurring action of the bowels. With the suspension of this treatment the disease recurs; with its resumption the disease again subsides; and no treatment appears to be permanently successful which does not provide means for securing daily relief to the intestinal canal. What are the details of this treatment?

I shall answer this question best by giving *au naturel* the directions which I should prescribe for an ordinary patient. On first waking in the morning, sip a quarter of a pint of cold water. On rising, take a tepid sponge bath; dry quickly, and follow with a brisk towelling. Clothe warmly and loosely; see that there is no constriction of the body or of the limbs. Have four simple, but liberal, meals daily, arranged after this fashion: Breakfast, eight to nine—whole-meal bread and butter, with one or two eggs or some broiled fresh fish, or the wing of a cold chicken or pheasant, and towards the close of the meal half a pint of equal parts of milk and tea, not infused longer than five minutes. Lunch or dinner, one to two—fresh, tenderly-dressed meat, bread, potato, well-boiled green vegetable, and any sort of simple farinaceous pudding or of cooked fruit, preferably apple; drink one glass of Burgundy alone or in half a tumblerful of water. Tea from four to five—whole-meal bread and butter, with a cup of equal parts of tea and milk. Dinner or supper, from seven to eight—this should resemble the mid-day meal, but should be less in quantity. Nothing is to be taken after this meal, nothing between meals, and nothing but what is here set down. Walk at least half an hour twice daily, and as much more as strength and convenience will permit. Retire to bed about ten, and repeat the sponging and towelling. See that your bedroom is cool and well ventilated. Lead a simple, regular, active, occupied, purposive life; and do not notice or distrust yourself.

With such instructions modified according to individual peculiarities, I prescribe an old-fashioned ferruginous cathartic, to be taken twice a day, about eleven and six. Usually it is an acid mixture, designed somewhat as follows: Ferri sulphatis, gr. xxiv.; magnes. sulph., ʒvi.; acid. sulph. arom., ʒi.; tinct. zingiberis, ʒii.; infus. gent. col. vel quassiae, ʒviii.; Fiat. mist. Sig. One-sixth part twice daily, about eleven and six. Occasionally this acid mixture produces sickness, dries the skin, and is otherwise ill borne. In such cases I prescribe an alkaline cathartic mixture: Ferri sulphat., gr. xxiv.; sodii bicarbonat., ʒii.; sodii sulphat., ʒvi.; tinct. zingiberis, ʒii.; spts. chloroform., ʒi.; inf. quassiae, ʒviii. Fiat. mist. Sig. One-sixth part twice daily, about eleven and six. Sometimes neither mixture agrees, and then I prescribe sulphate of iron in pills with meals, and a saline aperient on first waking in the morning.

Upon the plan of treatment here described nine out of ten cases of this anæmia of girls recover their health in from one to three months; and if, when health is quite restored, one prescribes once or twice a week an aloes, myrrh, and iron pill, in doses just sufficient to bring about a moderate natural action of the bowels, the recovery will prove in all probability permanent. But upon this statement some of my auditors will remark, "It is the iron which cures; it is not the aperient." That iron has much to do with the cure of the malady I admit, but I doubt if it plays the chief

part; and I know that in numerous cases the use of iron, arsenic, and manganese unaccompanied by aperients has failed to cure. Furthermore, I have seen many patients who, having been treated in this manner unsuccessfully for months, speedily recovered their health under the influence of a ferruginous cathartic mixture and a regulated diet. And so clear and strong is the teaching of my experience upon the point under consideration that if in the treatment of this malady I were perforce limited to the employment of one sort of drug, the drug which I should choose for use would be an aperient.

And here I end where I began, by contending that the anæmia or chlorosis of girls arising in nervous constitutions with imperfectly developed sexual organs is caused for the most part, and in the first instance, by feculent retention and its consequences, and that the right as well as speedily successful treatment lies in the enforcement of a sound hygiene, the administration of ferruginous cathartics, and in the provision after cure for a daily and, as far as possible, a natural relief to the bowels.

The cardinal idea embodied in this communication, the idea of the evolution of diseased states from the retention in the body of its excretions and of the products of their decomposition, is one of wide application and of extreme importance in medicine. It has been often dealt with under the heavy discouragements of imperfect knowledge and unsound doctrines in past times; and in this Society, as well as elsewhere, I myself have endeavoured to call attention to the consequences and issues of pulmonary, cutaneous, and renal inadequacies. For a time, however, the wonderful results of bacteriological research engrossed our whole attention. But now that we are ceasing to be dazzled by their brilliancy and have had our visual powers restored, we can see that the ideas of auto-genetic and of bacterial infection are so closely related, and so curiously interact, that the true place of bacteriology in scientific medicine cannot be finally determined until the chemistry of all the devolutionary processes has been further advanced, and the relations of animal alkaloids and extractives to the genesis of pathological processes has been experimentally investigated anew.

Cavendish-square, W.

ON THE TREATMENT OF CANCER.

By PROFESSOR JOHN CLAY.

THE following cases of epithelial cancer have been treated during the past year, and as the disease has disappeared under the use of Chian turpentine they may be deemed of sufficient general interest to merit publication.

Epithelioma of the Uterus and Vagina—Mrs. B —, aged fifty-five, residing in Devonshire, consulted me on Feb. 16th, 1887. She has never had children. She was operated upon twenty years ago by the late Sir J. Y. Simpson for contraction of the os uteri. Since that time she has not enjoyed robust health, but has not suffered from any special illness. Menopause two years ago. She has an anxious expression, is anæmic, but not cachectic. Six months ago she had a profuse purulent discharge, which continued for two months, when a severe hæmorrhage ensued lasting more than a fortnight. She had some pains in the back and in the lower part of the abdomen, but they were never very acute. Palliative treatment only was adopted until the gravity of the case was recognised by a consultant, who excised the os uteri four weeks before I saw her. The operation did not arrest the growth, which seemed to develop more rapidly afterwards and speedily involved the vagina. A few days before coming to me she consulted Mr. Knowsley Thornton of London, who confirmed the diagnosis of malignancy and expressed his opinion that the case was too far advanced for operative treatment; he thought it improbable that the patient could live longer than a month.

On examination I found that the posterior wall of the vagina at its upper part was occupied by a growth of the size of a walnut. There was also a nodule, which was more diffuse, and seemed to arise from the anterior wall of the vagina. These growths, which bled readily on manipulation, met in the centre, and entirely prevented any exploration of the uterus. The lymphatic glands were apparently free, and there was no bladder or rectal complication.

As there was no other plan of treatment open to her, I

recommended that the Chian turpentine should be pushed vigorously, the patient deciding to remain in Birmingham under my care. She was ordered one teaspoonful of Chian turpentine mixture, with resorcin, three times daily, to be rapidly increased to nine teaspoonfuls; the vagina to be syringed with equal parts of vinegar and water twice a day, and the growth to be painted two or three times each week with a solution of chromic acid (1 in 24). With the use of these remedies the growths diminished rapidly during the first two months, so that I was enabled to determine that the one mass did not proceed from the vaginal wall, as there was a projection of uterine tissue remaining, about a quarter of an inch in extent, proving that at the first examination there was considerable eversion of the cervix, and that when reduced in size the parts resumed a more normal position. The treatment was steadily continued, with occasional omission of the medicine, for two or three days consecutively. The vaginal growth entirely disappeared in about four months. The "stump" of the uterus was irregular, but did not present to the naked eye any appearance of being cancerous. There was no pain, and the slight discharge was singularly free from odour. At the end of six months the patient could walk three or four miles daily with comfort, and on a few occasions she drove upwards of twenty miles in an open carriage without experiencing fatigue. At the seventh month of the treatment she expressed herself as feeling well, and left Birmingham for Devonshire. Dusart's syrup was taken for the last three months. Mr. B—, in writing from home to me, stated that he had not seen his wife looking so well for fifteen years.

I had an opportunity of carefully examining Mrs. B— a few days ago, when I found that the vaginal growth had entirely disappeared; the part it had occupied was covered with pale but healthy mucous membrane. The portio vaginalis was limited to a ring of healthy tissue about one-third of an inch in depth. The os was patulous, readily admitting the finger, which passed into the uterus about three-quarters of an inch. The interior was smooth, excepting posteriorly, where there was a nodule the size of a pea, which looked healthy, and appeared to be a portion of tissue which had escaped the cancerous attack. There was no discharge, and the patient was exceedingly well.

Epithelioma of Tongue.—Mr. S—, of Sheffield, aged forty-eight years, consulted me on May 20th, 1886. He was in fair health and well nourished. He stated that he had been suffering from an ulceration of the mouth for some time, to which caustics had been frequently applied. He had recently seen Mr. Jonathan Hutchinson of London, who pronounced the case to be one of epithelioma, and advised its immediate removal by excision. The operation, as represented to the patient, appeared to him an unusually severe one, especially as it did not promise to permanently cure him. Casually hearing of the case of Mr. M—, recorded in THE LANCET of Oct 16th, 1886, he determined to consult me.

On examination, a fungating growth was found in the floor of the mouth on the left side, involving the gum and the edge of the tongue for an inch and a quarter. The tissue surrounding it was very dense, the infiltration extending for quite half an inch. There were no sharp or irritating teeth, but the patient was a great smoker.

He was ordered Chian turpentine with resorcin, and to take one-twelfth of a grain of chrysophanic acid in pill every other night, also to have the growth painted with a solution of chromic acid (1 in 24) every other day. A gargle of perchloride of mercury (1 in 2000) was used as an antiseptic. This treatment was continued for four months, when it was found that two pieces had sloughed away from the anterior edge of the growth, and that the surface of the ulcer was covered by the characteristic grey slough usually present after the use of the mixture. The medicine was increased in quantity, and was well borne. The infiltration lessened, and the growth gradually disappeared—first from the gum,—being replaced by apparently healthy tissue. The floor of the mouth healed over, and the ulceration was limited on the tongue to a patch little larger in size than a sixpence.

At the end of thirteen months of the treatment the patient went to the seaside, where he caught a chill, and for the first time there was an enlargement of the left submaxillary gland, and a small abscess formed in the floor of the mouth. He was ordered half-drachm doses of the syrup of iodide of iron, and was directed to discontinue all local applications for a fortnight. At the end of this time the adenitis had disappeared. When two months more had elapsed the

ulcer was only the size of a threepenny-piece. Mr. S— has been able to attend to his profession during the whole of the treatment, and is now in excellent health. He patiently and perseveringly followed out the treatment, being ably nursed by his wife, to whom great credit is due for the punctual and careful manner with which she carried out my instructions.

Epithelioma of Nose and Face.—Mrs. S—, aged forty-five, a widow, consulted me on June 4th, 1887. Menstruates regularly; general health good. Has an epithelial ulcer on the left ala of the nose, and encroaching on the cheek. It began as a small warty growth two years ago, and readily bleeds during bathing, &c. Perforation was imminent. She had been under medical care almost constantly since the appearance of the disease, but without benefit, and as the affection was rapidly extending, she applied to me.

In this case I was desirous of trying the effect of the Chian turpentine alone. I therefore ordered her two teaspoonfuls three times a day, and to dress the ulcer with simple ointment. During the first six weeks there was no change in the appearance of the condition, and she began to despair of ever being cured. I told her, however, to persevere. After the treatment had been continued for two months the sore was covered with a greyish slough. At the fourth month two-thirds of the ulcer had healed, showing only a dark crust about the size of a fourpenny-piece. In two or three weeks the scab fell off, leaving the sore absolutely healed.

Epithelioma of the Uterus.—Dr. Hamilton of Finsbury-circus, London, has kindly furnished me with particulars of a case treated by him, and of which nothing was known to me until I received his report. The notes should be very highly appreciated, as the case is unique in regard to independent testimony, combined with a thorough and incontestable diagnosis. The communication is as follows:—

"May 27th, 1887.—The patient some five or six years ago had a small growth on the cervix uteri, which I pronounced to be epithelioma; it was hard, nodular, and attended with an irritating discharge, which was frequently bloody. After consulting a local medical man, who confirmed the diagnosis, I took her to Mr. Knowsley Thornton, who also agreed with us, and excised the growth, putting on chloride of zinc paste afterwards. I then had sections made of the tumour, examined it microscopically, and sent one to Mr. Thornton; it was undoubtedly malignant. The growth returned in about six months' time, and the patient again saw Mr. Thornton, who stated that the cancerous material had now invaded the body of the uterus, which was fixed with it, and that this time he could do nothing without he scraped it all away from the interior. This, however, he did not advise at all strongly; he just took off what he could on the vaginal part of the cervix, and put on some chloride of zinc paste as before. I then made up my mind to try the Chian turpentine, and I kept her on that and the compound sulphur pills for about a year; the symptoms gradually disappeared, the discharge and blood lessened, until, I may say, now there are no symptoms whatever indicating a return. Now this was a case of undoubted epithelioma, as shown microscopically; and I have, as you may imagine, now the strongest possible faith in the efficacy of Chian turpentine."

Birmingham.

THE CLIMATIC TREATMENT OF PHTHISIS IN THE STATE OF COLORADO.

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FROM a very early period in the history of medicine we learn that change of climate and change of air have been considered as remedial agents of great efficacy. Supported by custom and fortified by experience, this opinion was always acted upon, although there were no substantial reasons given for doing so. In fact, we may say that until Sir James Clark's book was published on the "Influence of Climate," in 1829, no definite ideas had been entertained, and no rules had been laid down, for the guidance of physicians in selecting a climate for any disease. Sir James Clark's treatise dealt with the influence of climate in the prevention and cure of chronic diseases, more especially of the chest and digestive organs. The book is full of wise reflections