

and was obliged to have an attendant sit up to help him turn over during the night. He was given one treatment daily, and for one week was carried to and from his room to the bath. After that time he could walk unaided, and continued to progress till February 25, when he returned to business, gradually taking on his full duties. He had then received but twenty treatments. He has continued the use of the Turkish bath once every week since, and to this day, May 20, 1890, he has had no return of rheumatism.

Case 84.—T. B., Jr., aged 35, came to the institution April 25, 1867, suffering from rheumatism partly developed. After two treatments the rheumatism was so acute that he was unable to move without great pain, attended with high fever. After six days, during which he took two treatments a day, he was able to return to business, and has not been troubled with rheumatism since.

Case 251.—C. R., aged 20, a young German, was brought to the institution suffering from acute rheumatism, unable to walk or help himself. He was given two treatments a day, and for two days he was apparently no better; thought himself that he was worse; but in one week he was able to go up and down stairs without help, and in three weeks he left for home without an ache or pain.

Case 2248.—H. L. R., aged 55, case of rheumatism in right shoulder, reported that after the first treatment he had the best sleep of any time during the previous fortnight, and with daily treatment improvement continued to a quick recovery.

Case 2806.—W. H., aged 21. A severe case of chronic rheumatism which had existed for months. Brought to the institution by his physician. He was anæmic and much emaciated, weighing but 100 pounds. Pulse 120, temperature 101°. Only able to take a few steps with much suffering, and that with the aid of a stout cane. There was enlargement of both knees and ankle-joints, and the synovial membranes distended by effusion. After three months he was restored to health, having taken two treatments daily, and gaining in that time seventeen pounds in weight.

Case 3375.—Mrs. J. F. Y., aged 40, was brought to the institution helpless from a severe attack of acute rheumatism. Any motion of the limbs caused intense pain. After one week of daily treatment she was able to go to and from her room unaided, and improvement continued till at the end of two months she was in better health than she had been for years before.

The one thing most prominent in the treatment of rheumatism by the Turkish bath is the fact that it works in consonance with every physiological law, and that it tends only to place the system in harmony with itself. When we se-

cure a harmonious interchange and natural action of every function, we have the highest condition of health that the individual is capable of attaining.

Inasmuch as rheumatism is all-pervasive and all-prevalent, and the Turkish bath is its most perfect antidote, the more we spread the knowledge of its good work and help to popularize and promote its general adoption, the more we help on the better time coming, by adding to the length of days of man.

SOME NOTES ON THE NAILS.

Read in the Section of Dermatology and Syphiligraphy, at the Forty-first Annual Meeting of the American Medical Association, at Nashville, Tenn., May, 1890.

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In the early days of the world, before man had learned to utilize the stores of nature, the nails were of far more importance than at present. As the first weapon of attack and defense, the first implement of digging in the soil, or cutting or preparing the food, a healthy finger nail was one of the necessities for a healthy existence.

Even at the present time, they are of the utmost importance as an ornamental and useful appendage of the skin.

They preserve the delicate and sensitive nerves of the posterior terminal portion of the fingers from contact with irritative substances. They protect the sense of touch in the tips of the fingers from becoming dull by constant contact and perform a thousand other useful offices. It will thus be seen that attention to their health is of paramount importance. Fortunately for both physician and patient, diseases of the nails are comparatively limited in number. This is due to the fact that they are composed entirely of flattened epithelial scales which contain neither blood-vessels or nerves. They are, therefore, practically precluded from being the subject of either inflammation or neuralgia. They are, of course, liable to all forms of external injuries, but unless the injury extends to the structures beneath or adjacent to them, the result is not serious. The treatment of wounds or injuries to the nails is in fact a treatment of the structures which are wounded or injured at the same time. If the nail alone is fissured or broken or torn, there can be nothing done except to trim the surface down and wait for all trace of the injury to grow out, as it will do in all cases except when the matrix or root of the nail, is destroyed.

In that event the nail will not be reproduced, but the integument will become hard and cicatricial like.

One of the diseases with which the nails are liable to be affected and to which I wish to refer,

is known as onychogryphosis, or hypertrophy of the nails.

This disease consists of an abnormal increase of either, or both, the length or thickness of the nail. It is due to an excessive proliferation of the cells of the root. It may be uniform, affecting the whole nail, or only certain portions. In the form most usually observed the hypertrophy or excessive cell deposits occur principally in the central portion of the toe nail, elevating it there and producing an upward curvature. As a result the edges of the nail are depressed, and forced into the soft structures of the toe, producing more or less irritation and inflammation. In neglected cases the inflammation may lead to very serious consequences, requiring, at times, excision of the entire nail. This form of the disease is generally the result of prolonged pressure, as from tight fitting shoes, and is seldom observed anywhere except in the nails of the toes, especially the big toes. It is sometimes observed on the fingers in persons who from their occupation, or in obedience to fashion, are in the habit of wearing tight-fitting gloves. Idiopathic cases sometimes occur as the sequelæ of rheumatism, scarlet fever and other diseases. This is, however, rarely noticed. The treatment of hypertrophy of the nail consists in removing the cause of the disease, and restoring the natural condition of the parts.

No remedies will do any permanent good if the cause be allowed to continue. If, as is usually the case, the disease is limited principally to the nail of the big toe and the adjacent soft parts, the patient must be ordered to remove the pressure, by either cutting out a piece from his ordinary foot covering, or to discard it for a slipper, until cured. When this is done the edges of the nail will no longer be forced down into the sensitive inflamed flesh, and relief will be given at once. The free edges of the nails should then be trimmed down as close as possible, and a mild sedative and astringent ointment applied to the painful parts. One of the best applications is a 5 per cent. ointment of the oleate of tin, or if there be much inflammation a 10 per cent. ointment of the oleate of lead.

Another excellent application is tannic acid 1 part, bismuth sub-nitrate 1 part, adipis 12 parts. If there be much pain 5 grains of powdered opium should be added to each ounce. In some cases the best results are obtained from applying pure carbolic acid directly to the raw surface. A momentary burning sensation is produced, which is quickly succeeded by entire relief from pain. A solid stick of nitrate of silver may be used to accomplish the same purpose. Another analgesic ointment is composed of salicylic acid 20 grains, ext. belladonna, 10 grains, adipis 1 ounce. In chronic cases, where the surface remains raw for days after the pressure

has been removed, reparative action can usually be promptly produced by abandoning the use of ointments and dusting the surface with powdered cinchona bark, or pure tannic acid, or oxide of zinc, or bismuth sub-nitrate. If the nail remains thick, or continues to increase in thickness after the removal of all sources of pressure or irritation, its surface should be softened by frequent applications of liquor potassæ, and then gently scraped with a knife or abraded by a file until it returns to its natural condition. Nightly applications of salicylic acid ointment or plaster over the nail are also serviceable.

Internal medication is seldom required unless the pain be extremely severe, or there is some constitutional disease present. In the former instance, full doses of morphia are indicated to allay pain and procure sleep. In the latter case appropriate anti-syphilitic, anti-strumous, anti-rheumatic or other needed remedies should be freely given. If the hypertrophy is due to parasitic infiltration, it may be necessary to destroy or remove the greater portion of the diseased nail surface.

SOME ABNORMAL CONDITIONS DUE TO REFLEX NERVE ACTION.

Read before the Spokane County Medical Society, July 3, 1890.

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My purpose in reporting the cases detailed in this paper, is to give some additional testimony as evidence of the importance in practice, of keeping constantly before us one of the first principles in the treatment of disease, namely, the removal, so far as possible, of the *cause* of every abnormal condition that we are called upon to treat.

Disease in its various forms exhibits so many phenomena for which we can find no adequate cause, it is not a matter of wonder that we at times fall into a routine practice of treating symptoms.

At the same time, we are justly proud of our superior methods of diagnosis that have enabled us to acquit the liver of many sins of other organs; to stop some supposed "consumption coughs" by checking the discharge from the posterior nares; to relieve many cases of so-called fever by evacuating pus cavities in various portions of the body, and in a hundred other ways to alleviate suffering, and cure patients who would have been left by our predecessors, to endure the pain and discomfort, and in some instances to perish.