

But, while it is thus recognized that there is one common poison or basic cause for a large number of apparently diverse diseases, the precise nature of this primal poison is acknowledged to be undetermined by, and unknown to, the author.

Now, this theory of the unity of cause and spontaneous origin of such diseases is of much more comprehensive application than is here given it, and is supported by reason, observation and experience, as well as exemplified in chemistry, physiology, etiology, pathology, hygiene and therapeutics, being also in direct conformity with the laws of nature in general. Long since I arrived at the conclusion that there was one common pathogenic factor or underlying morbid principle of a great variety of apparently distinct diseases, and that all the varied so-called scorbutic, necræmic, zymotic, septic, contagious, infectious, mephitic, putrescent, and allied diseases, by whatever name designated, are dependent upon one and the same basic *materies morbi*. Moreover, observation and experience taught me that this primal poison and morbid factor from which all others originate, is of an alkaline nature; and finally, investigation convinced me that this general *fons et origo mali* and basic pathogenic principle is the well-known volatile organic alkali—*Ammonia*, that is spontaneously engendered within, as well as without the vital organism, which is frequently surcharged therewith from either or both intrinsic and extraneous sources. Furthermore, that while the fixed alkalis—soda and potassa—in excess, induce a similar scorbutic state of the system, the primal poison and general basic pathogenic factor of all such maladies, and, in fact, the common underlying, complicating and malignant element of all diseases—local as well as systemic—is this omnipresent, noxious, volatile organic alkali—ammonia.

Thus, the superalkalinity from an excess of ammonia in the animal organism induces a scorbutic, toxæmic, typhohæmic, septic, infectious, phlogistic, pyæmic and deliquescent dyscrasiæ, with concomitant necræmic, uræmic, lithæmic, zymotic, phlegmonous, febrile, suppurative, microbial, contagious, mephitic, colliquative, and disorganizing sequelæ, of a varied character and complexity, according to the quantity or degree of activity of this virulent agent in the economy, and special favoring influences of climate, season, weather, exposure, occupation, ingesta, tendencies and conditions of system, habits and modes of living, pestilential and other morbid agencies, which are manifested in diverse diseases, as malarial, yellow, ship, typhus, enteric, puerperal, and other malignant and low fevers, with variola, scarlatina, cynanche, diphtheria, measles, eczema, cholera in its various forms, diarrhœal, leucorrhœal, albuminous, serous, hæmorrhœal, purpuric, purulent, and sanious defluxions, erysipelas, anthrax, carbuncle, gangrenous, contagious, scorbutic, mephitic, putrescent, and colliquative diseases and complications generally—both constitutional and local. Hence, while this primal *fons et origo mali* and basic morbid agent—ammonia—is always the same, the secondary and complicating poisons, contagious prin-

ciples, microbes, pathogenic influences, morbid conditions and diseases may vary indefinitely.

Thus, by a process of evolution from the constituent elements and basic principle of ammonia within as well as without the vital economy, varied noxious agents, poisons, ptomaines, contagia, microbes, and diseases of a scorbutic, purpuric, toxæmic, zymotic, septic, phlogistic, febrile, pyæmic, purulent, infectious, malignant, mephitic, colliquative, gangrenous, disorganizing, and adynamic character, are spontaneously as well as secondarily developed in the living body, in like manner as the multifarious plants—microscopic and macroscopic—or forms of life and organic substances—both noxious and innocuous, are produced in the earth from the same elemental principles, according to season, weather, temperature, moisture, or climatic, meteorological, and other favoring conditions, ammonia, with carbonic acid and water, affording the essential elements or basic material for the development of toxic and morbid agents, microzymes, disease, and decomposition within as well as without the animal organism.

Hence, as all these varied manifestations, toxic principles, conditions, microbes, and maladies depend upon the same general agent and basic pathogenic factor of an alkaline and ammoniacal nature, it naturally and logically indicates the correct counteracting and true remedies or specific treatment therefor—both preventive and curative—which are of an acid, antialkaline, antiscorbutic, antizymotic, antiseptic, germicidal, disinfectant, resolvent, depurative and corroborant character, as practically demonstrated by sanitary, hygienic and therapeutic measures, from both empirical and scientific observation and experience, proof of which, with the special articles, forms, varieties, properties, combinations, and applications of protective and remedial agencies therein, I have presented in my recent work on “The Basic Pathology and Specific Treatment of Diphtheria, Typhoid, Choleraic, Zymotic, Septic, Scorbutic, and Putrescent Diseases,” generally.

January 30, 1885.

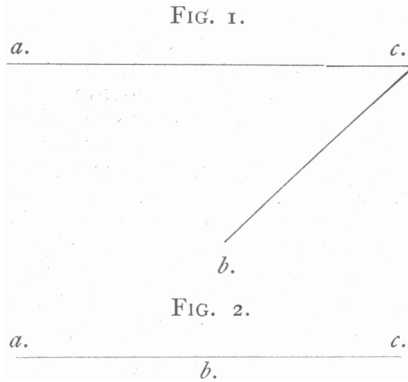
MECHANICS OF THE V LEVER BRACE IN POTT'S DISEASE.

BY C. E. WEBSTER, M. D., CHICAGO, ILL.

THE MECHANICS.

My attention has several times been attracted by descriptions of this apparatus. The paper recently published in the JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION so fully sets forth its construction and mode of application that a discussion of its mechanics may not be out of order.

As described by the author, Dr. Charles F. Stillman, of New York, the apparatus acts upon the principle of a spring-lever posterior splint. How does it differ from the older application of this same principle?



Let Fig. 1 represent the new apparatus and Fig. 2 the old. We will first consider its application as a lever. Traction is exerted on the ends of the spine, at *a* and *c*, pressure applied to the point of curvature, at *b*. As in each instance *b* is the fulcrum of the lever, the pressure at that point will equal the sum of the forces applied at *a* and *c*, therefore, as levers, we see that the two appliances are identical.

As springs, they differ materially. In Fig. 1 the spring is *a, c, b*, which is longer than *a c*, the spring in Fig. 2. If the same sized rods were employed for each spring, in order to exert a given force at *b*, greater displacement of the points *a* and *c* of Fig. 1 would be necessary than of Fig. 2, for the longer rod would be more flexible.

This difficulty is overcome in the new apparatus by making the angle *a, c, b* adjustable, thus permitting any desired amount of displacement of the ends *a* and *c*. In the old apparatus, this adjustment of the ends of the spring can only be accomplished by bending the rod *a c* in a direction contrary to the curves of the spine. It is not so convenient but an equally efficient mode of making the necessary pressure.

In the older appliances, the spring being short, any yielding of the spine at the point of curvature would cause a greater relaxation of the spring than in the new. For this reason, the old apparatus requires closer supervision by the surgeon than the new, and the new apparatus is more likely, in the hands of careless surgeons and instrument makers, to produce cordosis. There is no new principle applied in this instrument; it is simply a new application of an old principle, much used in spinal braces. As such, its range of usefulness can best be determined by a practical test.

MEDICAL PROGRESS.

MATERIA MEDICA AND THERAPEUTICS.

SALICYLIC ACID FOR CORNS.—M. Pierre Vigier (*Gazette Hebdomadaire de Médecine et de Chirurgie*) observes that there have been for some time past sold in the shops various applications for corns under the most fantastic names, but of undoubted utility. Their authors have profited by the remarkable properties of salicylic acid, fixing it by means of collodion, and which, applied

to the skin, produces a solid varnish, and causes neither pain nor other inconvenience. He has examined all these secret preparations, and believes that the following formula is a correct representation of their composition: Salicylic acid, 1 gramme; alcoholic extract of *cannabis sativæ*, $\frac{1}{2}$ a gramme; alcohol, at 90° , 1 gramme; ether, at 62° , $2\frac{1}{2}$ grammes, and elastic collodion, 5 grammes. Mix *secundum artem* and keep in a stoppered bottle. This is applied by passing over the corn several times a little brush, or the end of a match, which has been dipped in the liquid. This is repeated every other day for a week, and some days later the corn may be easily removed under pressure of the finger, or after a foot-bath.

SURGERY.

OSSEOUS FORMATION OF THE DURA MATER.—Dr. C. W. Morgan gives, in the *Australasian Medical Gazette*, the case of a West Indian black who went on a drunk, the effects of which kept him in bed for several days in a "sulky" condition, he neither eating, drinking, nor speaking to any one. On the fourth day the doctor saw him, when his case presented the following symptoms: Head thrown backwards and to the left side, teeth clenched, muscles of the jaw rigid, left sternomastoid in a state of chronic contraction, risus sardonicus of face affecting the left side only, eyes fixed and staring to the left, pupils sensitive to light, right arm semiflexed and rigid, ulceration of lower lip, no power of deglutition. Two days later condition much the same, a slight swelling is observable on the anterior surface of the right parietal bone, like an incipient "puffy tumor" as described by Pott. This tumor became more marked later in the history, was slightly painful when touched, causing the patient to flinch. From the eleventh to the fourteenth day he suffered from slight epileptic fits. He became comatose and died on the sixteenth day of his illness.

Dr. Morgan diagnosticated the existence of mischief immediately under the swelling inducing separation of the dura mater, but considered that to use the trephine would be running too great a risk. Post-mortem.—No external marks of injury to the head. On reflecting scalp a patch of ecchymosis observable under the "puffy tumor" above described. Pericranium non-adherent, and the surface of the cranium darkened and dusky-red in color in this situation. Calvarium removed and exhibits a discolored patch about the size of a five-shilling piece, on its internal table, corresponding to the outward discoloration. Dura mater exhibits same appearance of dark patch, at the lower end of which there is a perforation leading to a cavity, in the interior of which is to be perceived growing from the inner surface of the *dura mater* a spiculated irregular-shaped piece of bony deposit; the cavity containing no fluid nor matter. On the right side of the *falx cerebri* there is also a bony plate, somewhat like a small limpet shell, and also an irregular spiculated piece of bone. These are on the same plane with and adjacent to the cavity above described. The vessels of