

In conclusion let me say that, aside from the satisfaction and pleasure derived from the scientific meetings and the social entertainments, I shall always cherish the memory of having seen the City of Moscow, with the Kreml, and its 450 churches and their golden cupolas, of which the Church of the Savior is the just pride of the city, and St. Petersburg, with its many palaces, and the Isaac's Church, with its columns of lapis lazuli and malachite—a memory which more than compensates for the fatigue of the long journey.

SOME FORMS OF CATARRH AND THEIR CURE.

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The general practitioner is wont to declare, "You can't cure catarrh," yet this is but an abbreviated phrase that expresses a fraction of truth. Did he affirm, "You can't cure some cases of catarrh with local applications," he would tell the whole truth, and nothing but the truth, and the honest rhinologist, who can see further than his nose, would be compelled to acquiesce. Nevertheless, we unhesitatingly pronounce most cases of catarrh curable, but with many of them local medication of the inflamed area forms an insignificant part of the treatment. There is a principle in therapeutics as old as the hills, and quite as discernible to him who can focus facts behind his retina, that to cure disease you must *remove the cause*. But as many see the mountain in front and miss the sheen of the sunset beyond, so physicians persist in treating the palpable effect, and are blind to the obvious cause.

Nasal obstruction means nasal catarrh; it may not be to-day, but must be to-morrow. The local irritation, interference with drainage and rarefaction of air in the post-nasal chamber, insure a pathologic sequel. Spray and applications avail us nothing, while obstruction remains. Water will not wash away a wart, nor is it easier to press in place the deflected bony or cartilaginous septum with astringent

douche, or blow it back with cloud of medicinal dust. Unguents may undermine scabs but they cannot disintegrate osteoma nor soften enchondroma. And he who goes contrary to the rule of cause and effect seeks to dislodge the foundation stone of rational medicine. It is not uncommon to see perfectly healthy persons victims of an irritant catarrh, since the physical defects that supply the cause are often congenital or the result of traumatism. In such cases when we remove the cause nature does the rest. The density of the air in the post-nasal chamber is restored, proper drainage is secured, the Schneiderian membrane becomes healthy, and function returns. Respired air is washed of germ and sifted of dust, and the necessary humidity maintained. The patient being healthy, not in part but in whole, by inviolable law, must get well, for the perfectly healthy body cannot maintain local disease without a local irritant. With untied hands nature never stands still, nor does she need a medicated excuse to do her duty. So we say, such catarrhs can be cured; not only cured, but from them we may secure our most brilliant results. Dealing with them we may "throw physic to the dogs," with knife and saw we do our work, *sans peur et sans reproche*.

Far be it from our purpose to advocate operative procedure in all cases of catarrh. It is when we have obstruction dissociated from diathesis, and disease dependent upon obstruction, that we would employ the knife. The possible restoration of septum and turbinal is the one indication for operation. The nasal passages of different individuals vary greatly in size, according to the shape and dimensions of the organ. There are noses so roomy that quite prominent projections occasion no interference with the volume of air. In extreme cases they serve rather a useful purpose, in reducing the dimensions of an abnormal cavity, thereby facilitating the physiological function of the turbinals. When we have to contend with

DIATHESIS,
as a factor in the production of catarrh, mindful of one law, let us attempt no patchwork therapeutics, but seek to build up a body. It is here that the graduated specialist fails in results. He is essentially a localist, and works through organ and not through system. No matter what his academic training, it does not conduce to the broader view. He is handicapped by time; "Rome was not built in a day," and the specialist should be made, not created. Of diathesis, we may say, some are born with it, and some achieve it, but; however it may be acquired, it is not to be eliminated in a week nor a month by any hocus-pocus of medication nor antagonism of drugs. Not by the

treatment of one organ, but the entire body; nor with one therapeutic resource, but many may we expect to eliminate the numerous influences that have conspired to produce a dyscrasia. Through a slow eutrophiic process we effect our change that is not to be the temporary good feeling of the time, but the lasting accompaniment of renewed vitality. The conditions resultant from the catarrhal diathesis are many, their manifestations protean. It may be simple intumescent rhinitis, the plugged rhino-pharynx of adenoids, the hypertrophied tonsils, the gelatinous polyp. Or, the catarrhal tendency may dive deeper and show itself in laryngeal cough, trachial and bronchial discharge, the dreaded "winter cough," or worse, a vesicular catarrh, to end in disintegration. Not content with smiting the respiratory tract in spot and throughout, the hydra-headed guest takes another turn and there is gastric catarrh. Step further and the intestines are involved. Through auto-inoculation, gastro-intestinal catarrh, by deranging the general system, may be responsible for, and perpetuate inflammation in the nose, pharynx and larynx, and in a multiplicity of organic disturbance disease of one organ "fans another's fire." Who ever saw the simple nasal or pharyngeal catarrh of the confirmed dyspeptic get well and stay well with the gastric condition unchanged? We constrict and cauterize the intumescent turbinal, but the swelling returns; we ablate tonsils, and curette adenoids, but laryngo-pharyngeal hyperæmia blooms to plague us. Finally, the consumptive ghost, whom it may be our unthanked office to "lay," stalks in. By such methods we have eradicated nothing but confidence. All the chronic acid in Christendom can't cure catarrh dependent upon constitutional depravity. True, we may burn until only unresponsive and non-weeping cicatricial tissue is left, but in such event, like true allopaths, we have merely substituted one condition for another. And, in our generosity, we have given more than we took. It is in such cases that the physician needs his nerve, nerve for that candor which can contemplate a probable loss of fee. But there need be no misgivings. It pays to tell these patients the truth—truth that acknowledges no specific—to hoist the signboard that points no royal road to health. He who is master of the system, who is not mentally myopic, will invoke the aid of

HYGIENE,

as of first importance in this doctrine of physical regeneration. To undo the diathesis is the mission of all remedies. If this be not altogether possible, we can, at least, modify it. The accomplishment of either result may mean the repression of natural taste, the

curtailment of appetite, the renouncement of habit, abundant self-denial, the giving up of vocation, or even removal to another clime. Environment, occupation, exercise, food, clothing, sleep, rest and habit must be carefully considered. The many little drains upon the body's vitality must be unsparingly condemned if they conflict with our purpose. Ours is an animal economy, and animals are not bred in cages. We need exercise, not the exercise that develops one organ while the others are quiescent, but the fuel that puts every wheel and cog and band in motion. One secret of the Englishman's superior physique is his regard for athletics and outdoor sport and life. Nor do I mean the distorted vision that exalts college gymnastics into academic honor, but the common sense that regards the healthy body as an indispensable requisite to happiness and good mental and physical work. There has been a notable increase in the size of New York young women during the last decade, brought about through the promotion of athletics, notably rowing and tennis. The tennis court, rowing, hill-climbing, the bicycle (with limitations), the Country Club, are blessings to the urban resident, and should receive all encouragement from the city physicians. Gymnasiums confine and necessitate the breathing of vitiated air. For these reasons, and the fact that they do not supply the mental exhilaration of "green fields and pastures new," they can never take the place of exercise in the great open.

Nothing contributes more to bodily resistance of cold, and is more tonic in its effect, than the cold bath. Of course, some there are who cannot take it by plunge, but they may receive a like benefit from sponging. The system is made tolerant of draughts, and sudden exposure by teaching the arterioles to expand and contract, and the vigorous toweling restores warmth. Very delicate persons may take the sponge bath; the delay in its accomplishment is so little that the muscular movement precludes the possibility of catching cold.

Food is a most important consideration. The flabby, phlegmatic epicure should be put upon short rations until he has reached a dietary that he can assimilate. The candy-eating child must be encouraged to a healthier appetite. Stimulants, so-called foods, and warmth producers, have no place in our therapy. They spur a jaded steed. Their rejuvenation of an hour is the depression of a day. More neurasthenics there are from idleness than work. The *dolce far niente* maid or matron, groaning and growling under a weary life in a palace of luxury, must be given mental and physical occupation to stimulate sluggish organic function. The underground clerk

will find the quitting of his vocation a prerequisite to cure. Thus must we strike at the parasites of health, for only by so doing can we achieve success. Of

MEDICINES,

There are few to aid us, but the few are of great value when judiciously selected and wisely administered. Drugs that are worthy adjuvants to hygiene may accomplish nothing, alone. This is in harmony with the keynote of this article. We require shot, not bullets, to bag our game. No drug that works with quick effect is more than a stimulant or palliative. Only those which, through the slow process of eutrophia, promoting excretion, elimination and nutrition by increasing organic functioning are of any continued benefit. We pour in iron and it lands in the liver, or passes unassimilated through the intestinal canal. Pepsin and the digestive aids are about as efficient as sugar of milk.

Most tonics are mere stomach congesters. They make the patient "feel good," but do not promote metabolic equilibrium. Frequently, it is not even this, but the mental effect of suggestion. Several months of astringent, antiseptic cleanliness may be sufficient to convince the expectant patient that he has received his money's worth, but too soon for our reputation his symptoms return. We have exchanged respect for dollars, and in time our more candid but less "promising" neighbor may win both. The only drugs we can depend upon in catarrhs, resulting from organic sluggishness, are

ALTERATIVES.

Of the subtlety of their beneficent action we know practically nothing. For one scientific satisfaction we might wish to, but for our utilitarian purpose it is unnecessary. Empiricism cannot always be rejected. Wood, a great scientist, long ago sought to impress upon the profession the avoidance of that narrowness that demands the whys and wherefores in the treatment of disease. Alteratives, by increasing nutrition and the constructive metamorphosis, eliminate disease from the tissues. Those that we may most rely upon are mercury, gold, arsenic and iodine. The remarkable results attained by the use of arsenic in certain anæmic, and the great benefit from iodine in catarrho-scurfulous conditions, are so well known to laryngologists and physicians generally that their discussion need not be elaborate. Keyes first pointed out the potency of mercuric chloride in minute doses as a tonic in the several anæmias. Nor was it necessary that the profession should be afflicted with Keeleyism for the demonstration of the exceptional catalytic influence of gold. That advanced scientist, Barthallow, was wont to dilate upon its

value in his medical lectures two decades ago, and it was then that the writer had his attention first directed to it. The following combination, known as the "4 C's," that has become so popular with the profession in certain anæmias, owes its efficiency largely, if not entirely, to the mercuric chloride and arsenic it contains:

R _x	Arsenici chloridi	gr. j.
	Ammonii chloridi.....	℥ij.
	Tinct. Ferri chloridi.....	℥iv.
	Hydrarg. bichloridi.....	gr. jss.
	Syrupi	℥iij.
	Aquae ad:.....	℥vi.

M. Sig: ℥i, 4 times daily.

Two years ago there was brought to the writer's attention what he considers a better combination of almost the same remedies. Because of his experience with the above formula he was induced to prescribe arsenauro and mercauro. The increased efficiency is doubtless due to the gold they contain. These remedies commend themselves additionally by their elegance. In these days of refined pharmacy and æsthetic taste it is no enviable reputation to possess that of the nauseous doser. We are compelled to humor both optic and gurlatory nerve. Arsenauro and mercauro are beautiful to the eye and almost tasteless. They are given in doses of from five to thirty drops, the average patient taking about fifteen. Like all true alteratives their effect may be, and generally is, slow. They do not serve the purpose of saloonish medication. The introducers of these preparations make no claim to quick effects. The alteration of the conditions they are to reach cannot be effected except by slow processes—mercauro is indicated where there is liver torpidity, and arsenauro in cases where we have more of the neurotic element in evidence.

And so, in summing up our position with respect to the permanent cure of catarrh, we say seek the cause, nor mistake a symptom for the basic trouble. If the local disease is the result of obstruction, remove it; if the effect of faulty bodily habit, regulate life; if a simple manifestation of physical depravity, eliminate the dyscrasia.

Keeping to these ideas as our cardinal principles we may fail—and surely will with some—but we will have the satisfaction of knowing that no successor will succeed, to our chagrin.

Grand and Lindell Boulevards.