

## James Compton Burnett



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## Inhalt / Content

1879 - Case of loss of speech and paralysis of the lower extremities

1879 - On *Ceanothus americanus* in its relations to diseases of the spleen

1881 - Case of feared hare-lip treated by medicine

### **1879 - Case of loss of speech and paralysis of the lower extremities**

“On August 15, 1877, Joseph, aet. eleven, was brought to me to be treated for neuralgia and rhachalgia.

*Previous history.* - Nine months ago he was observed to wince when being rubbed with the towel after his bath. At first he was scolded, as it was ascribed to naughtiness, arising from a desire to shirk his bath, but it was soon noticed that the wincing occurred only when his spine was touched, and that the nape was the tenderest part. He was placed under the care of the late Dr. Macdougall, of Liverpool, who blistered the nape, and told the mother that there was something wrong with the brain and spine. Very severe ear-ache next supervened, and the patient was taken to the Liverpool Eye and Ear Hospital, where wax was discovered in his ear, and dislodged by means of the syringe and warm water; oil was ordered to be dropped into the ear. Soon after this a pain in his head of a really terrible nature supervened; starting from the ears, going up the temples, over the eyes, and across the forehead; the pain was also very severe behind the ears. For this iodine was prescribed to be painted behind the ears. The pains were of a neuralgic nature, coming on in paroxysms every few minutes by day, but not by night. This state of things continued for about two months, and then to the pain on pressure all up the spine, to the otalgia and cephalalgia, was added loss of power of speech at intervals. This latter was such that there was physical but not psychical paresis; he could read mentally, and write and communicate with his friends freely in writing. These attacks of dumbness lasted two or three days (and nights), and he had five or six of them in about as many weeks. Then he became *nearly* well for three or four months, excepting the spinal tenderness, having only slight attacks, and being able to go to school.

Three days ago, August 12th, 1877, these attacks of pain began again after his rolling on the grass. He is very fond of "turning cart-wheels," and "standing on his head," and as for climbing walls, trees, and water-pipes, he has no equal in these parts. Hence he has had a great number of falls in his life, some of them completely stunning him, and his mother stands in constant dread of his being brought home dead from some such fall; she says, "if we do not know where he is, and we want to find him, we look for him at the top of the tallest tree." This acrobatic skill causes his mother to fear that if he escape an untimely end from accident, he will "do on the stage."

*Status praesens.* - While making these notes in my case book, patient has had two attacks of the neuralgia here in my consulting-room; it is very distressing to behold, and moreover very characteristic; he burrowed with his head in the soft arm-chair, and screamed and sobbed notwithstanding that he was unable to speak. He is said to be rather obtuse and bad at his lessons, and generally backward intellectually, but his looks do not bear this out. His nose is very flat at the bridge, as if it had been knocked in by a fall: small pieces of bone have at times passed from his nostrils, and he has ozaena, but his parents take no account of it. There does not appear to be any history of hereditary taint, neither does he strike one as scrofulous. Pressure on the spine and hairy scalp pains him, and causes him to cry out. Eyes brown, pupils equal, lazy; pulse 60; bowels costive; urine normal.

*Progress and treatment.* - The pathological conception *trauma* stands out boldly in this most interesting case, and hence I take advantage of our grand master's genial generalization with regard to the *panacea lapsorum (arnica)*, and give one drop of it in the first dilution every three hours.

22nd. He was ill the whole of the day of his first visit to me, but the following day the pain left his head entirely at 11 a.m.; he was unable to speak the whole day, but began to utter words at 7.30 p.m., and ever since (six days) he is quite well, both of the neuralgia and of the loss of speech.

Had the *arnica* anything to do with this cessation?

Probably, for these reasons. The *mode* of the cessation of this attack differed from that of all former attacks. On all former occasions, the pain lasted as long as the loss of speech, but on this occasion the neuralgia ceased at 11 a.m. (he having taken three powders, on each of which was one drop of the medicine), but the speechlessness continued till evening. Besides, the attacks generally lasted longer. R. sac lac.

Sept. 5, 1877. Excepting the spinal tenderness, and a little aching in the left ear, he continues well. R. *arnica* 1. One drop of the tincture daily.

17th. The ear-ache disappeared, and he continued well until to day, and now he has suddenly become paralysed in the lower extremities, with great pain in the cervical and lumbar portions of the spine.

Parents, of course, in dire distress. Sensation in his lower extremities is complete, he feels the slightest touch in them, and he has complete power over his sphincters. Otherwise nothing abnormal beyond his usual obtuseness and the ozaena.

We read in the pathogenesis of *gelsemium sempervirens* (Allen) symptom 459. "Loss of voluntary motion of the lower extremities," and symptom 492, "complete relaxation of the whole muscular system with *entire motor paralysis*." Therefore *gelsem. semp.* 1, two drops of the tincture in water was administered every hour.

18th. No amelioration, but less pain; slept well, appetite good; he has the same good spirits as ever, and now that he is paralysed in his lower extremities he still evinces acrobatic proclivities by making the maid-servant carry him on her back while he seizes hold of, and tries to hang on to rails and pegs; moreover, he has already discovered a peculiar mode of locomotion that amply suffices for his ordinary wants, and consists in working himself along the ground with arms and trunk. His mother cannot keep him in bed, is greatly distressed, and presses me for a prognosis.

19th. No amelioration; continue medicine.

21st. Same.

22nd. No amelioration; the parents are getting very uneasy, and consider it a hopeless case. I accordingly suggest another opinion.

23rd. No amelioration. Continue the *gelsemium*.

24th. Has had a good deal of pain in the spine, and the parents want something else done at once; in vain I plead that Dr. Drysdale has promised to come in the afternoon - something must be done instantly, so I prescribe *nux vomica*, 2, every hour.

24th, p.m. Dr. Drysdale kindly came over and fully entered into the case; he agreed with me in giving a rather unfavourable prognosis. The parents expected no better, but the lad was thereby a little disconcerted, and consented to remain quietly in bed.

Dr. Drysdale and I then discussed various remedies, notably *secale cornutum* and *lathyrus sativus*, which he suggested, but before proceeding to one of these we agreed to give *arnica* a somewhat fuller trial than it had had.

R. *Arnica montana* two drops in water every 3 hours; nothing else except rest in bed, and making the patient promise to remain six weeks in bed as a start.

26th. No amelioration. Continue the *arnica*.

Oct. 1. No amelioration. All through the case I could not divest myself of the traumatic idea, and it was particularly strong upon me at this time; so before giving the *secale* or the *lathyrus*, I thought I would give *hypericum perforatum*, as being to injured nerve what *arnica* is to muscle. I cannot say that I expected much from its use, and I fully anticipated that I should not only have to give *secale* and *lathyrus*, but also many more paralyzers, and fail at last.

R. *Tc. hypericum perforatum* 2, four drops in water 4 times a day; otherwise nothing but to continue in bed.

4th. Better, can move his legs a very little; they tingle a good deal. Continue the *hypericum*.

8th. Still better; begs to be allowed to get up, but I refuse. To continue the *hypericum*.

12th. I find him up and dressed, but sitting on the floor; on enquiring if he has complete use of his legs, he jumps up and walks round the room. Sadly wants permission to go out, but I only allow him to go in an easy perambulator. Continue the *hypericum*.

17th. Perfectly well. My ordering him about in a perambulator had a tragic end, for Joseph got his brother to wheel him up to Traumere (one mile), and they both returned with I know not what story, but with the perambulator in fragments under their arms. He could not help disobeying the doctor, as, the perambulator being broken, he was obliged to walk home. I allow him to walk, but not to run or climb. To continue the *Hypericum*.

24th. Continues quite well, and has become intolerant of all restraint and medicine-taking. The spine, however, is still tender, and his ozaena continues as before.

May 29, 1870. Since I saw him on Oct. 24 last year, patient has remained quite free from either paralysis, earache, head-ache, or loss of speech, but his spine has continued a little tender at times. Three days ago, however, a pain came in the middle of his back like a lot of needles running into it; the feet and legs also pricked for about five minutes. Of these pains and pricklings he has had a great many this morning (six) in distinct attacks. The spine is excessively tender on pressure from the vertebra prominens down to the coccyx. Repeat the prescription of Oct. 24, 1878.

He was well in a few days as to his spine; his ozaena now became object of treatment; this has been undertaken by my colleague, Dr. Reginald Jones.

Sept. 18, 1878. I made a call to enquire after patient, and find that his health is indeed excellent; his spine will now bear any amount of pressure. His obtuseness is very much less, and his mother epitomizes his condition thus: "Except the smell from his nose, there is no boy better, and his nose is better than it was, especially since the injections." What treatment he has had for his ozaena I do not know; and, indeed, that is a new chapter of some length. I forgot to mention that the attacks of pain and prickling in May were due, in the opinion of patient's mother, to a fall, but patient would not confess to it.

*Conclusion.* - I refrain from any pathological speculations, and leave the bare facts of the case, remarking only that I believe the *arnica* cured the neuralgia, and the *hypericum* the paralysis."

(J. Compton Burnett, M.D., Case of loss of speech and paralysis of the lower extremities, The Monthly Homoeopathic Review vol. 23 (1879), p. 14-18)

## 1879 - On *Ceanothus americanus* in its relations to diseases of the spleen

"For several years I have been in the habit of using this drug in true Rademacherian fashion as an organ remedy. The perusal of Rademacher's *Magnum Opus* is one of the greatest literary treats that ever fell to my lot ; based on Hohenheimian bizzarries, avowedly and obviously merely an attempt at reducing his genial erratic *pretended* mysticism to the concrete form of a practice of medicine, by depolarizing it, if I may so speak, it is nevertheless the most genial and most original production it is possible to find in medical literature. It is the most bare-boned lawless empiricism that one can conceive, and yet there are two leading ideas running through the entire work, and these are the *genius epidemicus morborum* and organopathy ; and, considered from the pharmacological side, the other two ideas of universal (general) and particular medicines. For Paracelsus there were only three universal remedies, and so also for Rademacher and for their followers. Hahnemann has but three fundamental morbid states, psora, syphilis, and sycosis. Von Grauvogl has but three constitutions of the body - they might have all been working out the fatherlandish proverb, *Aller guten Dinge sind drei !*

The *genius epidemicus morborum* is beyond question a fact in nature, but it is dreadfully eel-like, hard to get a grip of. The same maybe said of Hahnemann's tripartite pathology and of Grauvogl's three constitutional states.

Rademacher's organopathy (that an otherwise able modern writer appropriates with child-like *naïveté*) is no more and no less than the homoeopathic specificity of seat, with just a dash of a mystic psychic something in the several organs ; if we set aside this little particular soul for each organ, it is only local affinity, or elective affinity. And it is quite true in nature, and the mind that cannot, or will not, recognize it, is wanting in catholicity of perception ; and *in practice will often go a mile when three paces would have reached the goal*. Whatever else cantharis may be, it is first and foremost a kidney medicine ; whatever else digitalis may be, it is primarily a heart medicine ; and let belladonna be what it may, it is before all things an artery medicine, and just in this sense *ceanothus Americanus* is a spleen medicine.

The spleen constitutes a dark corner in the human economy, whether considered physiologically or therapeutically. I have heard it professorially very ably argued that the spleen is the principal manufactory of our blood corpuscles. I have heard that theory equally ably and professorially refuted, and in its stead the thesis set up that the spleen is, as it were, the *ultimum refugium* of the old and effete blood corpuscles, wherein they are broken up and their *débris* sent off again into the circulating medium. A third argued that all this was veritable nonsense, as the spleen had nothing whatever to do with either making leucocytes or breaking up their reddened descendants, that in fact the spleen had no other function than to act as a reservoir for the blood, being, indeed, a kind of living sac in the side, to swell or shrink according as the circulation required more or less of the circulating fluid.

I fondle this latter theory myself, and like to call it mine; whose it really is I do not know. Perhaps the erudite editors will kindly add a foot-note, and say what they think the spleen is good for beyond serving as the anatomical whereabouts of that enigmatical something that supposedly sends my dear fellow-countrymen in shoals off London Bridge into the Thames on a rainy or foggy day - I mean, of course, *le spleen!*

This great bugbear of our Gallic and Germanic brethren - as applied to ourselves *bien entendu!* for they consider it essentially a *morbus Anglicus*, just as we like to think it is principally those naughty French who commit suicide - is really only another name for being "hipped," or suffering from an attack of hypochondriasis, and there cannot be any sound reason for refusing it a habitat under the *left* ribs, since so many have welcomed it under the right ones.

My first and only literary acquaintance with *ceanothus Americanus* is the very short empirical account of it in Hale's New Remedies, which I read some five or six years ago. Previously I had frequently felt a difficulty in treating a pain in the left side, having its seat, apparently, in the spleen. *Myrtis communis* has a pain in the left side, but that is high up under the clavicle; the pain that is a little lower is the property of *sumbul*; still lower of *acidum fluoricum*; a little further to the left of *acidum oxalicum*; more to the right of *aurum*; right under the left breast of *cimicifuga rac.*

These remedies promptly do their work when these left-sided pains are a *part* of the disease-picture, but they will not touch the pain that is deep in behind the ribs of the left side ; more superficially *bryonia* has it ; a little deeper than *bryonia*, *pulsatilla nuttal.* will touch it; and so will *juglans regia*, which poor Clothar Müller proved as a student. But the real splenic stitch requires *china*, *chelidonium*, *berberis*, *chininum sulfuricum* or *conium*, or *ceanothus Americanus*.

Some years since I treated a lady in Chester for "violent vomiting, pain all up the left side, cough, with expectoration, profuse perspirations, and fever." She was not a Cestrian, but came only for a short visit, and took lodgings in a small house facing a meadow on the banks of the Dee ; the locality was at one time a part of the Port of Chester, but was many years ago reclaimed. At my first visit she told me she often got inflammations on the chest with cough, and finding considerable fever, cough, pain in left side, and dullness on percussion of the same side, I quickly ticketed it *pleuropneumonia sinistra*, and gave *acidum oxalicum*, which seemed to cover all the symptoms, and to correspond also to the supposed pathological state within. *Oxalic acid* somewhat relieved the vomiting, but nothing more, and I then gave various remedies, such as *aconite*, *bryonia.*, *phos.*, *ipec.*, and thus elapsed about three weeks, but patient remained as ill as ever.

Then I went into the case with very great care, and examined my patient very thoroughly, and, see, there was *inflammation of the spleen*. I gave her *ceanothus Americanus* in a low dilution, and all the symptoms, subjective and objective, disappeared right off, and my previously ill-treated patient was sitting up in a week, and quite well in a few more days. I had never before met with splenitis in the acute form, and have never since met with it.

A few cases of chronic pains in the spleen occurred subsequently in my Chester practice, and they rapidly yielded to *ceanothus*, one of which I well remember; it is this : - -

*Chronic splenitis.* A young lady of about 26 consulted me for a chronic swelling in the left side under the ribs, with considerable cutting pain in it. She stated that it was worse in cold damp weather and she always felt chilly ; the chilliness was so severe and long lasting that she had spent the greater part of her time during the previous winter sitting at the fireside, and now she was looking forward to the winter with perfect dread. In the summer she had felt nearly well, but the lump and the chilliness and pain nevertheless persisted, but it being warm she did not heed it much, it being quite bearable. *Ceanothus Americanus* quite cured her of all her symptoms, and subsequent observation proved its permanency. Often during the following winter she called my attention to the fact that she was not chilly and-felt well.

One of the first cases I treated at the Wirral Homoeopathic Dispensary in Birkenhead was that of a young man somewhat similarly suffering.

*Chronic splenitis.* This young man was sent to the dispensary by the then manager of Messrs. Thompson and Capper's Birkenhead establishment, and was occupied in the Liverpool post office in some light but ill-paid employment.

His whole trouble consisted in *severe pain in the left side in the region of the spleen*, and he had long vainly sought relief of many, probably at dispensaries. He therefore put in an early appearance at my new dispensary to try the new doctor, probably on the well-known principle

of the new broom. He had become quite low spirited and began to fear he would become totally unfit for work, and naturally that was a very serious matter for a young married man. He told me he had formerly helped his wife in her household matters, doing the heavy rough work, but the pain in his side had now become so bad that he could not carry a bucket of water into the house or even sweep up their little yard, as handling the broom pained him so dreadfully.

I was pressed for time and prescribed *ceanothus Americanus* in pilules of a low dilution, and promised to go into his case that day week, meaning to percuss the part and ascertain whether the spleen was enlarged. He returned that day week almost well, and the following week was quite well. At my request he again reported himself some time afterwards and he still continued well.

I resolved to begin my next case with the physical examination. My next case was this -

*Chronic hypertrophy of the spleen.* A middle aged lady consulted me, shortly after the above case, for a *severe pain in the left side and a large swelling in the same position.*

Remembering the last case I said I must examine the side. She objected, so I declined to treat her, then she said she would think about it and consult with her husband on the subject. In a fortnight or so she returned (driven by the severe pain in the side), and I examined the side and found an enormous spleen occupying the entire left hypochondrium, and reaching inferiorly to about an inch above the crest of the ileum ; it bulged towards the median line and ran off to an angle laterally. It was of long standing.

Gave *ceanothus Americanus* in a low dilution.

This lady being very intelligent I begged she would allow me to examine the side again after I had finished the treatment. She promised to comply.

Fourteen days after this she came full of gratitude and reported that the swelling was smaller and the pain considerably less. To continue the medicine.

She never consulted me again, but as she was a near neighbour of mine I often saw her, and somewhat six months afterwards she called to pay my fee, and then informed me that she had soon got rid of the pain entirely and the swelling was much smaller, so she had discontinued the medicine altogether, and did not deem it needful to trouble me again. This is the usual thing. People will not be at the trouble of seeing the doctor as soon as they are better, they seem not to understand any interest one feels in the case. We can only make periodical reliable examinations of patients in a hospital ; in private practice it is extremely difficult, as all practitioners know to their chagrin. Still, *faute de mieux*, we must put up with those fragments. This patient had had no children, and had a very fresh complexion.

My next case is also one of *chronic hypertrophy of the spleen*, though only about half the size of the one just narrated. Subject, a poor woman of about 30 or 32 years of age, whom I was requested to see by a very kind hearted benevolent lay minister well known in Birkenhead and the neighbourhood. She is the mother of several children, very poor, ill fed and overworked, but withal a good respectable woman and very clean. She had a considerable and very painful swelling in the left side under the ribs, that had been there for some time, and latterly she could not get up on account of the severe pain. I carefully examined the tumour and satisfied myself that it was a very much swelled spleen, and the pain seemed to me to be due to its pressing against the ribs. I marked its size on the skin with ink, made her engage not to wash off the ink mark, and promised her I would call in a week, having first prescribed *ceanothus* as in the other cases. But the fates were against my laudable plan, for I received a message, the day before my next visit was due, to the effect that Mrs. - felt herself so much better than she was up at her housework, and begged me not to call again, as she thought it unnecessary.

Since then I have at times had cases of deep-seated pain in the left side to treat, and have mostly found it yield to *ceanothus*, though not always. In one case in which it failed the pain

was cured with *berberis vulgaris*. In one case of jaundice, characterized by very severe pain in the left side, I gave *ceanothus*, with very prompt relief of the pain only; *myrica cerifera* then finished the icterus. Before giving the *ceanothus* I had given *chelidonium majus*.

In one case of severe metrorrhagia, characterized by pain in the left hypochondrium, *ceanothus* gave instant relief to the pain, and checked the hemorrhage. It failed me in a subsequent similar attack in the same person when *conium* was effective, and was suggested by Dr. Thomas of Llandudno.

*Chronic splenitis, chills, and leucorrhoea.* Some four years since, perhaps a little more, I treated a lady of about 55. She complained of rigors at frequent intervals, and pain in left side, both of long standing. The leucorrhoea had lasted some twenty years, and was profuse, thick and yellow. She had been for years under the best allopathic physicians of Chester, and finally given up as beyond the reach of medical art, evidently on Moliere's principle that "Nul n'aura de l'esprit que nous et nos amis." Nevertheless, the patient bethought her of homoeopathy, and came under my care. Her last physician had finally suspected cerebro-spinal mischief, and hinted at incipient paralysis.

The pain in the side was the most prominent and distressing symptom, and for this I prescribed *ceanothus*. In a month the pain was entirely cured, and also the leucorrhoea, while the cold feeling was very much diminished, but not quite cured. I have also never succeeded in quite curing it with any subsequent treatment. I watched the case for nearly four years, and am thus enabled to state that the pain in the side and the leucorrhoea never returned, and the chilliness never again became very bad, but still she had it a little when I saw her last.

Cases calling for this remedy are not very common with me, but every few weeks I meet with one. Thus, since coming to London, I have met with one such, viz., a girl, Ada, aet. 14, who came under observation on Nov. 29, 1878, with *pain in the left side for some months*, and right-sided headache. She received *ceanothus* 1 in pilules.

Dec. 18. Cured of pain in left side, head better. Pergat.

Did not return.

*Ceanothus Americanus* never having been proved, at any rate as far as I know, I have always used it about 1x or 1, and sometimes in the mother tincture. Most of the persons with these splenic disturbances were in fair condition, and many complained of nothing else; many were women, and two of these were drunkards; many had "chills," but not all; none had ever had ague.

As a first contribution to a proving, I will add two or three data.

#### *Pathogenesis of Ceanothus Americanus.*

1. It very frequently relaxes the bowels, and I have known this even amount to diarrhoea.
2. *Ceanothus Americanus* 1, four drops in water three times a day was once given by me to a young lady (26) for *severe pain and fulness in left side, with inability* (for years) *of lying on left side*. In a few days she could lie comfortably on either side, and the pain in the side was said to be nearly well. This was my second visit, and I said, Go on with the medicine. She did, and I took these notes at my next visit: -  
"Had been taking it for about a fortnight, when one day I felt *great nervous excitement, with chilliness, loss of appetite*; felt as if the nerves were shaken, and one day at dinner could scarcely hold knife and fork."

The chilliness was chiefly down the back; she *shivered with cold chills* (i.e., rigors). Thinking these symptoms were due to the medicine, she left it off for two days, and the symptoms entirely passed off. Then she resumed the medicine for one day, and the same

symptoms again appeared; she again discontinued the medicine, and again the symptoms ceased. *Her bowels were relaxed.*

Subsequently her *menses appeared ten days too early, and very profusely*, a thing that had never happened before in her life, as her mamma informed me.

I mentioned this medicine to Dr. R. Hughes at the Manchester Congress, and Dr. Edward Madden and I partly agreed to prove it; I am not aware whether this gentleman has ever done it, if so, he has done more than I have in the matter, still it is obviously worth proving, for our good spleen medicines are not so very plentiful.

I have several times had the honour of calling attention to *Ceanothus Americanus* at the various meetings of the Liverpool Homoeopathic Medico-Chirurgical Society, but do not remember ever hearing any of the members mention having used it; they probably never need it, or very properly object to using an unproved drug as a remedy. Also as no notice of it ever appears in our journals it is probable that it is not a usual remedy with the profession.

We are overwhelmed with new remedies, and certainly need rather a better knowledge of what we have than the addition of any fresh ones. I therefore think it would be a useful undertaking for some one to prove the needlessness of *ceanothus* by showing how *deep seated pain in the left hypochondrium, acute and chronic splenitis, hypertrophy of the spleen, &c.*, can be more promptly cured than I here show. Some one living in a malarious district would have a good opportunity of showing its worthlessness in ague cases also."

(J. Compton Burnett, M. D., On *Ceanothus americanus* in its relations to diseases of the spleen, The Monthly Homoeopathic Review vol. 23 (1879), p. 153-160)

### **1881 - Case of feared hare-lip treated by medicine**

"My friend Dr. Noble, of Trinity Square, had the kindness to send a lady to me at the commencement of the current year. This was in consequence of the paper which was read at the Leeds Congress on the subject of the prevention of hare-lip and other defects by the medicinal and nutritional treatment of the mother during pregnancy.

February 18, 1881. - Mrs. - , aet. twenty-nine, residing in London, has been married four years and a half, and has three children.

First child. - This is a girl, normal in build, but came at the end of the eight month.

Second child. - This is a boy that came at full term, but with single hare-lip at the left side, and cleft jaw.

Third child. - Boy at full term, with very slight hare-lip of left side.

**Status praesens:** She believes herself to be in the family way at about the tenth week.

General health of Mrs. - and of her husband pretty good. She herself tells me that she is subject to headaches in the right temple, and that she has had measles three times. Has a constant feeling of nausea while carrying all her children, and it is *very bad* with this one; it usually lasts about three months. The veins of her hypogastrium were very much dilated with the second child, and slightly so with the first and third. The irritation therefrom was so great that she was obliged to rise in the night for relief. The veins of her thighs show a good deal. Is subject to piles, and occasionally has prolapse of rectum. The piles were worst with the second child. She is clearly of a venous diathesis. Her bowels are rather constipated. Her hair is brown.

Her husband has very black hair, and says he at times gets a relaxed throat, and suffers from a torpid liver, for which Dr. Noble occasionally treats him.

These are all the relevant particulars which I was able to obtain from the parents, both very intelligent people.

The father is the product of uncle and niece, but that offered no therapeutic basis. Neither psora, syphilis, nor sycosis seemed present in either of the conjugal pair.

It did not seem to me to be a case of want of the nutritional element, either quantitatively or potentially. The cause seemed to me to lie in the *blood life* of the mother. But where, and in what consisting? That lay beyond my ken; it was, in fact, unknowable.

The essentiality of a state may be unknown and unknowable, but **there were symptoms in the mother**, and therefore the scientific application of the law of similars was available. These symptoms were (1) nausea, worse in the evening; (2) sinking at the pit of the stomach before a meal; (3) much salivation; (4) anorexia; (5) aversion to butter. These five symptoms had clearly *some* relationship with the mother's digestive tract, and it is not difficult to suppose that a mother's digestion must necessarily influence the body-fruit within her both for good and ill. The next question was to determine what proved drug has similar symptoms to those of the mother.

I will not make any needless *détour*, but give the drug I diagnosed. It was *Sanguinaria Canadensis*. Take "Allen" and read symptoms: (246) "**Nausea in the evening**;" (294) \*"**Sensation of emptiness in the stomach**;" (244) "**Deathly nausea, with much salivation**;" (230) "**Almost a total loss of appetite**;" and (235) "**Aversion to butter**." Thus *Sanguinaria* covered the totality of the symptoms, and it was therefore prescribed. I gave five drops of the third decimal three times a day in all water.

March 7. - The sinking at the stomach a little better; salivation no better; there is less aversion to butter; appetite much better; nausea about the same, taste bitter; food acid. *Sanguinaria Can.* 6, twenty-four one-drop powders, one night and morning in water.

March 21. - Nausea better; sinking at the stomach better; salivation better; still dislikes butter. The taste is much better, and the food is no longer acid. Has a left-sided headache; is rather constipated; the rectum protrudes a little. *Sanguinaria* 12, given in the same way as last time.

April 4. - Nausea much better, but not quite gone; sinking very much better; still dislikes butter; the headache is gone. "On the whole I am very different from last visit," she said. She thinks the last prescription did her most good. R. *Sanguinaria* 30.

April 25. - Nausea still continues a little; the sinking is gone, but it recurs now and again; still does not like butter; salivation nearly gone. R. *Sanguinaria* 1, one pillule three times a day.

June 2. - Nausea gone; she now likes butter; very slight salivation at times. R. *Sanguinaria* 1, to continue taking one pillule at bedtime until the end of the eighth month of utero-gestation.

October 14. - The following letter finishes my story:

"October 10, 1881.

I have pleasure in giving the particulars you ask for as under:

1. Born 28<sup>th</sup> September. ". Boy (quite perfect). 3. Weight at time of birth, 8lb. 4. We expected the arrival about the 15<sup>th</sup>, so reckon the little one took about a fortnight's grace before making his *début*."

I have nothing to add beyond begging my colleagues to publish their practical experience on this very important and hitherto sadly neglected branch of practical medicine.

London, October 15, 1881."

(J. Compton Burnett, M.D., Case of feared hare-lip treated by medicine, *The Homoeopathic World* vol. 16 (1881), p. 505-507)