

bach's ganglia through the plexus mysentericus. C. J. B. Williams says disease consists of excess, defect, or perversion of normal life, necessitating, according to Scudder, sedation, stimulation, or alteration, for cure.

Intestinal colic, then, is either perversion due to excess, or perversion due to defect in the nervous energy generated in Auerbach's ganglia. Experience has shown that medicines making directly for the correction of these two distinct conditions are by far the most successful in the treatment of intestinal colic.

Why are they not adopted by all practisers of medicine? The query is a fair one, for we have men in each school of equal honesty, energy, mental grasp and self-sacrificing devotion to curative measures, who not only cannot endorse each other's conclusions, but are inclined to think each other dishonest because they cannot.

Leaving aside causes of deranged nerve force, such as the ingestion of too many green apples, which, of course, must be removed, let us glance at the treatment of intestinal colic. The regular schoolman would relieve his patient by using morphia, which only reaches the condition to afford relief by paralyzing sensation, which is a function of the cerebro-spinal nervous system. This means that the force from Auerbach's ganglia may still be acting abnormally, but owing to the paralysis of sensation due to the morphia, the brain is unable to report the condition to the patient's consciousness. This is almost an exact parallel to the use of chloroform in labor, where painful uterine contractions continue to the end of accouchement, but the patient does not know it, because the chloroform does not permit the nerves of sensation to perform their duty.

The homeopath would prescribe colocynth in a minute dose (3x to 30x dilution), because he knows that in a large dose it will produce similar symptoms. When colocynth fails, as it often will, he may adopt the eclectic remedy, *dioscorea villosa*, with but moderate success, because he gives it in too small a dose (1x to 1 gtt. of the tincture).

The eclectic would prescribe the *dioscorea* in large doses (5 to 30 min. of the tincture) because adherents of the school have found it efficacious. When it fails, as it often will, he prescribes with prompt success the minute dose of colocynth, because he has known homeopaths to prescribe it successfully. Colocynth and *dioscorea* act directly upon Auerbach's ganglia, and when they succeed they do so at once, without apparent effect upon the economy beyond relieving the painful contractions permanently.

These three methods of treatment of the condition known as intestinal colic are all seemingly successful. What is the explanation? The cause within the organism of the condition is either