

his regular vital plan, and ought not to be stigmatized by the name of disease at all.

Assuming that we have before us a case which clearly deserves the name of constipation of the bowels, the therapeutic inquiry is, how shall it be treated?

Aperient medicines are enumerated, and their characteristic properties described with the completeness and minuteness of a system of *Materia Medica*. Each drug has its specific virtues; give this or that, according as the constipation is more or less obstinate, and according as you have an adult or a child, a strong or a weak person to deal with. But when the present exigency is remedied, what about a week hence, a month, a year? Is the same drugging to go on eternally—the same potions, pills or powders to come round in rhythmic order, always satisfying the present need and no more?

The plan which I now propose does bestow some care on the future, and professes to be, so far, curative in its operation. It comprises four therapeutic factors: (a) minute and frequent doses of watery extract of aloes, very rarely of extract of colocynth; (b) a dose of sulphate of iron (gr. jss or ij.) always combined with each dose of the direct aperient, (c) regulation of the diet; (d) constitutional exercise. I have to write chiefly of factors (a) and (b). The quantity of extract of aloes, in all but extraordinary cases, should not exceed one grain. It is conveniently given in the form of a pill. With this pill there should always be mixed a dose of sulphate of iron, varying from one to three grains; this is the essential point of the treatment. Any other tonic of the neurotic kind cannot supply the place of the iron; for the purpose I am now relating, iron is not only *facile princeps*, but is not interchangeable with anything else. Extract of *nux vomica* may be added if the prescriber pleases, as an ornamental appendage or as a means of blending the other constituents together; and belladonna is a remedy of definite auxiliary power, but both these drugs, *quoad* constipation of the bowels, are uncertain or unsatisfactory, and rarely do permanent good. I begin, then, by desiring an adult patient to take a pill composed as above three times a day, immediately after the principle meals. He is cautioned that at first there will be no apparent effect, and two or even three days may pass before any medicinal evacuation of the bowels takes place, perhaps even