

ity—how is it possible that this can be admitted as a correct idea. Suppose a spark of fire to touch the tunica conjunctive, or suppose with a needle we prick the web of a frog's foot, or take any other delicately sensible part of the body, and suddenly apply a powerful stimulus: the consequence is Inflammation excited almost in an instant. What has this to do with viscosity of the blood? How will viscosity, moreover, account for *increased* action? the *sensation* of increased heat? the bright scarlet appearance of the part? which should rather be of a dullish leaden hue, were viscosity the cause. the pain, or excited sensation, which should rather be dulled, than exalted—the general febrile symptoms which often attend? and the frequent destruction of the part from over-excited action? Viscidity will never account for these.

The error loci, too, arising from the obstruction to perspiration, is an equally untenable doctrine. If I understand it aright, every time any part of, or even the whole body, is exposed to a sudden check of perspiration, so often must inflammation follow. Suppose, for instance, the hand at any time to be covered with perspiratory moisture, every pore of the skin open, dilate, and perspiring freely, the hand is suddenly plunged into cold water, the perspiration is immediately checked; dilation of the extreme vessels should immediately occur; *error loci* and Inflammation: how absurd and how untrue is this. Do we not know that it is a common practice with some nations, the Russians in particular, to leave their warm baths (every pore of the cuticle pouring out perspiration), and roll themselves in snow, alternately repeating the bath and the snow for hours together? and this they do with impunity, notwithstanding that every change from the one to the other should, according to this doctrine, excite Inflammation from head to foot. In fact the idea is absurd; the theory too confined; the *error loci* is true enough—we all can observe that—but the cause of that *error loci* can never be explained by such a supposition.

Dr. Cullen attributes the proximate cause of Inflammation to a spasm of the extreme arteries, supporting an increased action in the course of them; and further he goes on to say, “the vis medicatrix naturæ increases still more the action of the vessels.” His own words run thus: “A spasm of the extreme arteries, supporting an increased action in the course of them, may therefore be considered as the proximate cause of Inflammation, at least in all cases not arising from direct stimuli applied.” Let us explain this doctrine by other language, and see how it will read. It is admitted by all that in Inflammation the red particles of blood have forced their way into a channel through which they do not flow naturally. In short, according to the school term, there is an *error loci*, and in this *error loci* consists the essence of the disease; indeed, when once effected, Inflammation exists in all its essentials. But Dr. Cullen says this *error loci*, or congestion, is the cause of the spasm. How, then, can the spasm be the cause of its cause—that is, the congestion? The idea is altogether founded in error, and Dr. Cullen has totally forgotten the relative situations of cause and effect. In homely language, he has put the cart before the horse. After all,