

THE THERAPEUTIC VALUE OF THE POTATO

BY HEATON C. HOWARD, L.R.C.P. (LOND.), M.R.C.S. (ENG.).

For several years Heaton C. Howard (*The Lancet*, April 11th, 1914) has been studying the therapeutic uses of the potato. He mentions two facts which stand out prominently from his results. The first is the prompt relief of pain, acute or subacute; the second is the rapid absorption of fluid in cases of synovitis where this remedy has been employed. His results have been constant and thoroughly tested.

Upon investigation no alkaloid has been found in the potato, its chief ingredient being potash salts. The basis of all the pharmacological preparations is the liquid extract—*extractum solani liquidum*. The method of preparation is thus described: The raw potatoes are put into a hydraulic press and the liquid is squeezed out. One-half the weight of the tuber comes away as fluid. From this fluid the starch and nitrogenous matter is removed, leaving the juice with the salts in it. With heat it is concentrated and some glycerine added to preserve it, until it is five times the strength of the juice, i.e., ten times the strength of the potato itself. The ointment is made the same strength as the extract, being prepared chiefly with lard. With equal parts of the extract and lin. saponis co., or two of extract and one of soap liniment, a liniment is made. The plaster is made as ordinary plaster, strength ten to one. All these preparations are now on the market in England and sold at a moderate price.

The action of the liquid extract on synovitis with effusion into the knee-joint, whether traumatic or gouty, speedily relieves pain which does not recur. Absorption of the fluid takes place in four to six days. At the end of a week the patient is up, using the knee slightly. In fourteen to sixteen days he can resume employment.

In acute cases it is applied as a fomentation or poultice, one part of extract to three or four parts of hot water on three or four layers of lint, covered with protective, then cotton wool and a bandage. This should be renewed every two, three or four hours, according to the severity of the case, until the fluid is absorbed. No splint is required, but the patient must be kept in bed. Several cases are cited.