

up the central column of the cord, and not up through the straight fibers which conduct tactile sensation. If you can distribute your sensation so much that it will get broken up in the cord and will not reach the center for pain in the brain, of course the patient will not feel pain, and so antipyrin, nux vomica, strychnine, phenacetin, antifebrin, and all that class of drugs relieve pain with one exception—namely, if the pain be not too severe. If the irritation of the sensory nerve is so great that it will fill up all the channels for pain, then phenacetin or antipyrin may sometimes make the pain worse than before. I did not believe this; I thought it was quite contrary to anything that could possibly be, but a patient of mine told me that the antipyrin which I had prescribed to relieve headache made him very much worse. I thought he was mistaken, but I have no doubt he was quite right, and that the reason was that the irritation was so intense, for it seemed to him that the pain had been increased tenfold by this drug.

But there is another drug that is very much used, and which has a somewhat similar action, but it acts apparently more upon the posterior columns than upon the central columns—at least so far as experiment goes—and that is caffeine. In cases where the pain is so intense that these substances, instead of relieving it seem to make it worse, there is perhaps no drug to which you can have recourse except the subcutaneous injection of morphine, and that relieves the pain and gives the patient quiet for the time being. But of course there is always the difficulty of the morphine habit arising, and so you put off the use of this drug as long as you possibly can. In some cases where there is continued pain in the head lasting for a length of time cannabis indica seems to help, and this may be given either in the form of the extract or tincture. It is easier to regulate the dose of the tincture, and you may begin with 10 minims three times a day, gradually increasing the dose. You must be careful about cannabis indica. There is no danger in it, I think, but you may greatly alarm the patient's friends if you run beyond 15 or 20 minims until the patient is accustomed to it. You may bring on a state of maniacal excitement which will greatly alarm the patient himself and everybody around him, but the long-continued use of this drug will sometimes relieve these headaches when other things seem to fail.

For the relief of headache occurring through inflammation of the periosteum from gouty rheumatic irritation, it is fortunate that one remedy is very useful—namely, iodide of potassium, which should be begun in small doses, and