

cause. He enters upon the details of each in the 3rd section of the 1st chapter. Passing onwards Dr. W. proposes the inquiry, "*whether the effects (of medicines) are organic or functional.*" And we think he has offered a happy solution of it. Considering organic effects to imply such as are attended with appreciable change, he believes they may occur under different conditions. In the more intense, as decided transformations of texture, as in the action of chemical agents—or less obviously in an alteration in cell-existence. His words are "now it may be readily conceived that a medicine affecting the secretory function of an organ, shall act simply by increasing or diminishing the rapidity of the cell-action; that in the time required in health for the throwing off and replacing of a certain number of cells twice the number may undergo the same process in the one case, or only half the number in the other," according to which, of course, must be the quantity of blood in, and passing through the organ at a given time, and the amount of product actually secreted. And again, in like manner the *quality* of the secretion may be changed, by assuming the blood or pabulum to be mixed with foreign materials as drugs. These things are examples of organic effects; the fact of functional effects inducible by medicines, separately, from any organic change is not however entertained.

Proceeding forwards, we find our author considering "the modes of therapeutic action." These he arranges under the 12 following heads "1. Depletion; 2. Repletion; 3. Dilution; 4. Elimination; 5. stimulation; 6. Sedation; 7. Revulsion; 8. Supersession; 9. Alteration; 10. Anti-Causation; 11. Chemical action; 12. Mechanical action;" and the whole severally discussed in a clear and comprehensive manner.

The action of medicines is still further continued under the various classes to which they belong, where generic modes are considered as well as under the description of each particular agent, where special differences are particularly portrayed. The classification Dr. W. has adopted is based upon the same principle, as the original Cullenian arrangement, which Murray, Paris, Thomson and others, who have followed the great originator have more or less modified. Dr. W. divides remedies into two great classes of systemic and non-systemic. The systemic "operate upon the system," and the non-systemic "upon extraneous bodies accidentally contained within the system." The systemic are subdivided into general and local. The general, 1st into stimulants, 2nd sedatives, and 3d alteratives. Under the 1st are comprsed, *a.* permanent stimulants, as astringents and tonics; *b.* diffusible stimulants, as the arterial and cerebro-nervous, the latter being either nervous, cerebral or spinal. The 2nd is divided into *a.* arterial; *b.* cerebro-nervous, either nervous or cerebral. The third is undivided. Local reme-