

ants, counter-irritants or mercury—fat people generally bear evacnants and bloodletting badly, and *ceteris paribus*, are more easily vomited than those of a lean habit of body. Some are of a peculiar idiosyncrasy, so that a small quantity of a medicine will effect them powerfully, while the same quantity has on others scarcely any effect.

4th, CLIMATE AND SEASON. Evacuants such as bloodletting are not so well borne in hot climates as in cold and temperate, while on the other hand mercury is well borne in warm climates.

5th, HABIT mostly always lessens the susceptibility of the system to medicines, there are however some exceptions, such as mercury and some medicines of the irritant class. Mode of Life is not without its influence—those greatly or entirely living on vegetable food, are more easily affected by medicines than those eating largely of animal food.

6th, MENTAL ACTION. Medicines will act better when the effects are expected, and when the patient feels confidence in the prescriber; perhaps the only exception to this, is, when opium is given to cause sleep, as anxiety for the result may counteract the effect of the drug, especially if the dose is only a medium one.

7th, STATE OF THE DISEASE has great influence. Inflammation of the stomach for instance, increases susceptibility to emetics; inflammation of the bowels to purgatives, whilst apoplexy on the other hand, diminishes to a great extent, the susceptibility to purgatives.

THERAPEUTIC EFFECTS—MODE OF PRODUCTION.

1st, By removing the exciting cause, this they may do either directly or indirectly.

2nd, By depletion; sometimes there is a great fullness of the system which gives rise to many diseases and prevents the absorbents from acting efficiently—remedies then act therapeutically, by diminishing the quantity of the blood or the serum of it—besides bloodletting, cathartics, diuretics, diaphoretics &c., act as depleting agents.