

the first dose, and subsequently a drachm every hour and a half or two hours, until the physiological effects of the drug (twitching of the muscles) manifest themselves; these are always accompanied by marked amendment. The subsequent treatment hitherto adopted has been the administration of quinine and nourishing soups in small but increasing quantities. It is believed, however, that the continuance of the strychnine in smaller doses and at longer intervals would be more beneficial in the more dangerous and severe cases. As it is, complete recovery has taken place in many patients in whom the symptoms had been of the most deadly character, the pulse having been in some of them more than four hours absent from the wrist; and in them no stimulants were administered, at least until convalescence had fairly set in.

The type of the disease at Leven has been of the very worst character attended by comparatively little vomiting and purging; as a rule, the cramps not severe; but the patient struck down and sinking as from some overwhelming dose of poison.

The treatment of cholera by strychnine, then, seems to hold out a fairer prospect of success than anything hitherto tried, while it promises two great and eminent advantages: 1st, even where it does not cure, it always relieves the symptoms; and, 2nd, though useful even in the most advanced stages of the disease, its action is not interfered with, but rather assisted, by the previous administration of opium, which the united experience of, I believe, almost all those medical men who have had any experience of the disease has shown to be the most useful remedy in the earlier stages of cholera; for the researches of Brown Séquard, Bonnefin, and others have shown that morphia and opium act on the spinal cord precisely as strychnine does, and, when administered together, one-half of the ordinary dose of strychnine is sufficient to produce the same effects as double the quantity administered without opium. Were I to hazard a theory as to the *modus operandi* of strychnine in cholera, it should be based on this correlation subsisting between it and opium, and I would say that as all the symptoms of cholera collapse point to a cessation of all the acts of vital nutrition, and consequently of the circulation, throughout the frame, wholly independent of drainage by evacuation, and often most marked where there are no evacuations, depending apparently in such cases upon the charge of poison being sufficient at once to overwhelm the nervous system, and thus prevent that reflex action of the sympathetic and cerebro-spinal systems on each other upon which, according to all our present knowledge, these vital acts seem to depend, so then our best hope of cure would appear to lie in some drug which should so stimulate the cerebro-spinal system as to enable it to respond to