

duces fatty degeneration than on the rheumatic diathesis. This is important in point of treatment, for cod liver oil, so beneficial in chronic rheumatism, is one of the worst things that can be given in fatty degeneration, and I am much mistaken if one patient's death was not accelerated by its use in this disease.

Mr Smith, speaking of treatment, alludes to its inefficacy, particularly of antiphlogistic measures, as bloodletting and counter irritation, which seem called for from the anatomical changes present. The hips have been seen covered with the marks of leeches, cupping, moxa, &c., in patients in whom the disease has not been abated thereby; he says "rest, anodyne embrocation, keeping the joint protected by new mackrel or carded wool from the influence of cold and damp, together with the free and long continued use of hydriod of potas, combined with compound decoe of sarsaparilla, and small doses of colchicum constitute the mode of treatment from which I have seen most benefit derived." He insists on attention to the state of the stomach and bowels, although they are less disordered than is usual when the rheumatic diathesis is present. Recommends the Chelsea pensioner as an aperient thus prescribed Pulv. Guaiac. ʒss Rhei ʒi; Sulphur Potas Buart ana ʒi; Potas carb ʒi; Pulv Zingib ʒij melle. ʒ. s. ft elect; take 2 teaspoonfuls occasionally. He advises the patient, if practicable, to reside in a warm and dry climate, not subject to vicissitudes of temperature, and a trial of the thermal springs as of Aix la Chapelle. More however is got from these in cases simply of the rheumatic diathesis than in the disease after it has caused change of structure.

The hip joint in some very puzzling cases is the seat of hysterical neuralgia. Some years ago I was asked to see a young lady out of town said to have disease of the hip: the case was said not to be urgent, and therefore that I might choose my own time; being very busy, I did not go till I got a second summons telling me that she was suffering very much from the suspension of the previous antiphlogistics. I lost no further time, and found her healthy looking, but rather strumous. Her medical attendant told me she had had hip disease for six months, and before examining he called my attention to a small fistula a little below the head of the femur, which led to a portion of carious bone—this much in favor of scrofulous disease—but to my great surprise I found both buttocks exactly alike, neither one flattened or too full, but they had the round form of health though marked by the cups and cantharides &c, great tenderness generally but not increased by rotation or traction of the femur. Upon retiring I told the Dr. my conviction was that there was no disease of the joint. He was incredulous, but consented to follow any plan proposed. The patient was prudently told that the medicines used had subdued the disease, and that now she might begin to take a little exercise, and I ordered her the carbonate of iron. About a week after I found her in great pain, and her medical man still impressed with his old idea, but sure in my first conviction, and knowing how much the mind influences the body in exciting pain in any part to which its attention is directed, I begged him to let me speak more decidedly, knowing that till she was convinced of the absence of disease she would continue to suffer. He agreed to my doing so, and from that hour she rapidly got well. Her only medicine was steel in its different forms, but chiefly the carb of iron. She had no more local applications: in a fortnight she walked a quarter of a mile, and in a few