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On Hynata
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In regards

Four summary

In reading a review
On Neuralgia

The term Neuralgia is employed to denote an affection of the sensory nerves whose prominent symptom is pain, that pain being of a peculiar character, not necessarily accompanied by any other perversion of the nervous system nor attended by the ordinary phenomena of inflammation; it is an affection of much interest, for, if we regard its frequency, it is one of the most common ailments, the pain to which it gives rise is oftentimes agonising and at all times severe, while its diagnosis is not seldom perilously obscure and that too under circumstances when a true or false diagnosis may, by influencing our treatment, materially affect the patient’s safety. This affection has been recognised since the earliest times, Sciatica having been described under that title by Hippocrates and Aretaeus; but it was not until the middle of last century that Neuralgia obtained a separate and exact description, these descriptions chiefly having reference to the Dolomieu and now, although still ignorant of its exact and intimate nature, we are in possession of much precise information regarding it and of many expedients for
its cure. Neuralgia may be seated in any part of the body; being most common if we except Sciatica, in the intercostal and perineal regions, then about the head and neck of all in the abdomen, but, in what- ever part of the body it manifests itself, it presents many common characters so that it may be well, to consider it in a general way before noticing any of its special forms. Neuralgia then, consists in pain seated on the trunk or branches of a nerve, and distributed upon certain points of that nerve especially, these points being foci whence, every now then, dart forth pains of a shooting, plunging or tearing character which after a variable duration, subside, leaving a dull, heavy kind of pain which generally, although not always, continues until the occurrence of the next jumor, which may follow the previous one almost instantaneously or not for many minutes or hours. As to the predisposing causes of Neuralgia - It is essentially an affection of adult years, being very rare before the age of 10; it is rather more frequent in females than males and especially attacks those of the nervous temperament, particularly the Hypothetical. A debilitated state of the system would seem to be favourable to its development. Exciting causes - one of the most common
of these is exposure to wet and cold, particularly to a stream of cold air: cutaneous irritations as contusions, bark bites, blows over the course of a nerve, overstretching of nerves as after excessive fatigue, pressure upon them as in the case of the subcutaneous venous tubercle, pressure upon the vessels from whatever cause as an enlarged organ, a dilated vescel, tumours, any foreign body in all these are efficient and not infrequent exciting causes of Neuralgia. Some cutaneous eruptions too, as Herpes Zoster, are preceded and accompanied by severe Neuralgic pains; the real cause in this case may probably be the congestion which accompanies the eruption and yet it is difficult to understand why, if such be its real cause, Neuralgic pains do not accompany many more cutaneous eruptions - Curious Teeth: these often excite Neuralgia, producing it especially in the Dental branches of the 5th pair, but they may produce it in almost any part of the body as is shown by the disappearance frequently of others than Trigeminal Neuralgia by the simple removal of a Curious tooth - Disorders of the Alimentary Canal: It is strange that there should be such a difference of opinion in regard to the frequency of this as an exciting cause for there are very many instances recorded in which they seem to have been the only one, while
there are a great number of cases which, if not cured, are at least benefited by the free exhibition of purgatives. Diseases of the kidney, of the heart and large vessels are often accompanied by severe Neuralgic Paroxysms. Urinary disorders. These are a most frequent cause of Neuralgic pains; and this is partly to be ascribed the greater frequency of Neuralgia in females than in males. Dr. Addison has shown in his paper on the Disorders of Women, that it is of the greatest consequence in trying to remove these Neuralgic affections, besides employing constitutional treatment, to use local applications to the disordered organ itself. **Neuralgia from Spinal Irritation.** The tenderness which is sometimes felt on exerting pressure over the Spinoous processes of the vertebrae, has been thought to be a form of Neuralgia dependent, some authors say, on irritation or sub-acute inflammation of the cord, while others have thought it due to a spasmodic affection of the muscles of the back compriing the Spinal Nerves as they issue from their ganglions and various other hypotheses; but, as De Laycock has stated, we cannot by pressing over the Spinoous processes and pressure on the Spinal Marrow, we only press upon the Cutaneous nerves and the pain which is caused on pressing them may be due to some functional or visceral chronic disease, the morbidity affected.
viscera reacting upon the Spinal marrow and putting it into such a condition that all sensorial impressions, in passing through it are magnified, and the pain is very often due to Dorsal Intercostal Neuralgia, the cutaneous terminations of the dorsal branches of the intercostal nerves being affected by pressure just as the cutaneous terminations of the Trigeminal nerve are affected when that nerve is the seat of Neuralgia, the pains painful on pressure being the "Points Doloureux" of M. Balbi which will be spoken of hereafter. Dr. Baycock considers spinal tenderness to be no reliable indication of disease in the Spinal marrow but to be a symptom of functional or visceral chronic disease and also to be a valuable and early diagnostic symptom of the hysterical or Neuralgic constitution. Neuralgia from organic disease of the Brain and Spinal marrow. It is not uncommon for such affections to show themselves for a while, alone by the occurrence of Neuralgic affections in the Cerebral nerves especially and the viscera. Neuralgia frequently attends upon malignant disease and appears in parts affected with chronic inflammation. Neuralgia from Malaria. There would appear to be a close relation between Neuralgia and Ague, in fact, some writers, as Dr. Sower, seem to think that Neuralgia may be a manifestation of the Malarious influence just as much as Ague. Whether the relation be as close as this or not, there is, at any rate, no doubt of there being some
analogy between the two. For Neuralgia is very common in marshy districts; it frequently commences with cold and is succeeded by a sensation of heat; it is often periodical, and the same treatment is beneficial in both affections in many cases. Some have thought that Syphilis may give rise to Neuralgia; if so, it is probably not due to the direct action of the venereal poison, but to changes which are effected in the tissues such as swelling in the perineum or giving rise to pressure. In some cases, Anemia would seem to be an exciting cause of Neuralgia. For, when an organ is deprived of its due supply of blood, pain may be excited in it. Thus, we frequently have neuralgic pains coming on after deligation of an artery, after hemorrhage and in chlorotic girls.

Next, as to the symptomatology of Neuralgia. An attack of Neuralgia may commence suddenly or the paroxysm itself may be preceded by certain feelings of dullness, heaviness, heat, cold re; in a word, by disagreeable sensations in the part affected. In general the seat of the pain presents no outward indications of disease, although sometimes the skin is slightly redder at other times paler than natural; occasionally, but not often, there is a slight degree of swelling; i pain is the principal and almost the only symptom of Neuralgies.
it may be due to irritation of the nerve at the root of pain, or in some other part of its course, or it may be due to irritation of other branches of the same nerve, or the irritation may depend on a diseased state of the spinal marrow or of the brain, or again, the irritation may be seated in the viscera. There are two kinds of pain, continuous and intermittent. The first is generally just a feeling of uneasiness in the part affected; it very seldom altogether disappears in the intervals between the paroxysms. The second shows itself in the form of pain of a shooting, plunging, a darting character which lasts for a certain period (of variable duration) and then, either suddenly, or, what is more common, gradually subsides leaving the surface affected with the continuous pain spoken of above: these paroxysms recur at variable intervals and the same series of phenomena again occurs. As to the pain which may be caused by pressure, M. Balée has pointed out that pressure made with a large surface such as the palm of the hand does not cause much pain, even calms it sometimes; but that on pressing with one or two fingers along the trunk of the nerve, we come upon certain points where the pressure excites lively pains. These points he has called "Points"
Document: They vary in number and in the extent of surface which they occupy; generally there are more than one or two of them and the surface which they occupy is not extensive; generally the pain which we can estimate by pressure bears a relation to the severity or mildness of the spontaneous pain and it is important in a diagnostic point of view. Very often, during a Neuralgic attack, the functions of the organs which are supplied from the trunk, of which the nerves affected with Neuralgia, are branches, are disturbed. Thus, we may have, by reflex action, involuntary contractions of muscles, cramps, or an abundant secretion of saliva, tears or tears according to the part affected: in many cases of Neuralgia there are pains in other parts of the body, frequently rheumatical in character; in many there are functional disorders of various kinds, especially of the alimentary Canal, and, in females, of menstruation. Fibrile disturbance is not a phenomenon belonging to true Neuralgia. The duration of Neuralgia varies from a day or two to many years; the prognosis is favorable in the great majority of cases but, in some it proves very rebellious as when we meet with it in advanced life with a debilitated
Constitution, and when the malady has existed for a long time and is very violent in its character.

**Seat of Neuralgia.** Is this in the nerves or in the nervous centres? Some physiologists state that all sensations of which we are conscious are referred to the peripheral terminations of the sensory fibres, but there are facts which seem to prove that a sensation may be referred to various points in the course of a nerve; for, when we strike the ulnar at the elbow we feel pain in the nerve at the elbow as well as in the fingers to which it is distributed; and, as Barre has shown, the specially painful points in Neuralgia are very apt to be those where the nerve becomes superficial. Patients, too, very often speak of their pain in sciaticea; for instance, as shooting down the course of the sciatic nerve; it is therefore highly probable that pain in a nerve may really indicate by its situation the seat of the morbid action. This is of some importance in practice; it justifies us in applying redactive remedies as near as possible to the seat of pain. **Pathology of Neuralgia.**

There is but little known concerning the intimate nature of Neuralgia; we know it chiefly by the effects which it produces. We cannot assign to
it any proper anatomical lesions; visible lesions of
the most opposite kinds as hypertrophy, atrophy, softening, hardening, all these attend upon it but not in
a relation so constant or fixed as to justify us in
thinking that they have other than an accidental
connection with the disease; true, we may be able
to say that these are the exciting cause of the
Nervalgia, but, then these causes, being so opposite
in character, must act by producing some change in
the nerve structure of which we are as yet ignorant.
It has been supposed to be dependent on and
intimately connected with various Constitutional
states: Dr. Tregillus supposed it to be connected with
a Cancerous diathesis; others have thought it to be of
a Syphilitic nature but both these opinions are now
totally abandoned. Some have contended for a very
close relation existing between certain forms of
Rheumatism and Nervalgia: the two affections when
developed in their characteristic form are certainly not
alike, but there are some cases of Nervalgia which
present a good deal of the Rheumatic character as
when the pain is seated in the joints and manifests
a tendency to shift from one joint to another; again,
the beneficial action of some remedies as Menthe of
Ammonia can hardly be dissociated from its remedial action in muscular rheumatism and the partial paralysis which sometimes follows. Rheumatism is closely allied to the paralysis of motor nerves which sometimes occurs with neuralgic affections: but new, in Neuralgia there is no fever, the pain sometimes entirely disappears for certain intervals, there is the absence of heat or swelling in the affected part: the affections seem to be more alike in this one fact than in anything else, namely that the prominent symptom in each is pain.

In Rheumatism there is in all probability an excess of lactic acid in the blood while nothing of this sort has been suspected in Neuralgia; another proof of the distinct nature of these two affections is furnished by the fact, that Neuralgia sometimes supervenes in the course of Rheumatism, being distinguished from that affection by the usual lancinating character of the pain and by its periodicity. Some have thought that Rheumatism may sometimes be an exciting cause of Neuralgia, thinking that the latter may occasionally be the result of the pressure exercised upon the nervous filaments in consequence of the swelling which
accompanies Rheumatism. Neuralgia has been thought by some to consist of inflammation of the nerves, but, there are no proofs of the essential dependence of the affection on inflammation either of the sheath of the nerve or of any part of its structure; there are many cases, doubtless, where, on dissection, nerves, that had been the seat of Neuralgic pains, have been found red and swollen and otherwise giving evidence of having been inflamed; but, there are very many other cases where no morbid alteration whatever can be detected: still, it may be that inflammation of a nerve or of its investing sheath may give rise to Neuralgic pains, not by acting as the immediate exciting cause, but, it may be, from causing premen, or by disturbing the nutrition of the nerve, just as other causes may do, in a way with which we are not yet acquainted. Of late, a theory has been advanced to the effect, to an altered polarity in the nerve, causing pain, and Dr. Jones has recently put forth the view that Neuralgia (Pon."Organic") is due to the debility and frustration of the whole system which attends the affection; that this debility in want of blood leads to mal-
- Nutrition of the nerve which undergoes some molecular alteration that conditionates pain. He considers that damp, malaria or act in the same way. That Emyoty Neuralgia is due to the same kind of disorder in nutrition; on the other hand, when there is active hyperemia, the nerve would really seem to be in a state of hyperesthesia; hence why in some cases, good results in the treatment from the employment of derivative measures, such as blistering, while in others, and those the most numerous, we find good results from a tonic plan of treatment by which we restore the blood to a healthy condition.

It would appear then that the intimate nature of the changes which take place in the nerve, and which conditionate pain in Idiopathic Peripheral Neuralgia, are not known; probably there may be a constant and unvarying series of changes, and probably these may be produced by the various, what we may call, secondary phenomena (that is to say, secondary as regards the production of pain) as prepare from whatever cause, peculiar constitutional states or which frequently accompanying the affection.
Treatment of Neuralgia. There are few remedies in the whole list of the Materia Medica which have not been pressed into the service of Neuralgia and very various indeed have been the experience of different Physicians in the use of them: there are certain remedies however, both local and constitutional, which are undoubtedly of value and these we will now shortly review. But, first of all, in every case when a patient presents himself complaining of Neuralgic pains, we should carefully seek for their cause: we may find an explanation of the pain at the very spot at which it is felt, as a tumour, or in the trunk of the nerve supplying it: if we fail here, we must look to the condition of parts supplied by other branches of the same nerve, and next to the condition of the brain and spinal marrow: if we find nothing to explain it in all these, then let us inquire whether there be any intelligible cause of irritation elsewhere as a disordered stomach or uterus which, operating through the medium of the sympathetic system, might occasion the pain: this last suggestion is very imperative in the case of females, especially young females, for we often find Neuralgic pains associated in them with disordered menstruation;
particularly pain below the nipple on the left side, along the lower margins of the ribs in the right hypochondre, and all over the abdomen: if then he discovered any removable local cause of irritation, of course we will at once remove it; and, if there be any important function disordered, let that as far as possible be rectified before proceeding to treat the Neuralgia itself.

In speaking of treatment proper, we will first notice the principal local means that have been used and then the constitutional.

First, Local Treatment: sometimes benefit may be derived from local bleeding, cupping or leeches. The latter especially are sometimes useful when redness and heat attend the pain; there is however very rarely need for this measure. Extraction of a foreign body or Carious Teeth: When the pains can with some distinctness, as they often can in Trigeminal Neuralgia, be traced to a carious tooth, then the tooth must be extracted, but this is not to be done rashly: Galen speaks of cases where he had known the pain increased by this proceeding and of one case in which he could find no other cause for its production (probably in this latter case, the
Jaws and the mumps were injured. Dr. Rowland speaks of having in several instances of Neuralgia dependent on cutaneous eruptions, as herpes zoster, succeeded in removing the pain by touching the part with human cantharus, and he has found the same substance useful when applied to an old cicatrix which was the seat of Neuralgia; but, in general, the best treatment in this latter case is to remove the cicatrix by the knife; when the disease is occasioned by a small subcutaneous tumour, the best plan is to remove it by making an incision round it and then separating it from its connections. Many substances have been recommended to be used as ointments: 

Benzoic, 3/10 of an ounce; styrchnine, 1/10 of an ounce; opium, 3/10 of an ounce; Aconite and digitalis ointments too. These certainly never succeed in curing the Neuralgia, but if they have succeeded in mitigating the paroxysm, it may be well to keep them in mind as something to try. Other external remedies may sometimes be resorted to with advantage, such as the unplast. Belladon: unplast opium, bathing the affected part with lotions containing Hydrocyanic Acid, Belladonna Opium, &c.
Acupuncture: Vallet, Dr. Rowland and others speak not very favourably of this means of treatment, but, even so, cases are being reported, especially cases of sciatica, where it has been found useful.

Electricity: This has been proposed by Magendie and other French writers and, like many other remedial means, has been found useful in some cases (more especially Trigeminal Neuralgia) and perfectly useless in others.

Counter-irritant: Benefit is often obtained from the application of rubefacients and blisters over the affected part. The application of hot towel, Linimentum Ammoniacum or Tinctured Anthracene is sometimes useful. Vallet recommends and speaks very highly of the following plan of treatment; namely, the application of a succession of small blisters over three points of the nerve which are tender on pressure. The "points dolorous" as he has called them. Vallet states that he has found this practice most useful in its simple form, others again have been more successful in their treatment by applying hypodermic and Stypchnia over the blistered surface in
doses of from half a grain to 1/4 grains of the alkaloid, or a proportionate amount of the solutions. M. Rougie, a French chemist, employed Somnifin internally also, but it would appear that this only served to prolong the cure by producing movements in the part and thus bringing back the malady after the pain had been subdued: it appears to be the experience of most physicians that Morphia employed internally has often a wonderful effect in allaying the pain, although Balleit cites a case and others have been noticed where its use was the cause of much suffering. We must take care not to use too large a quantity, else symptoms of opium poisoning may appear. A modification of this treatment has been practised by some French Physicians which consists in inserting Morphia or Staphnis in under the skin just as in Vaccine inoculation is inserted in ordinary Vaccination. These inoculations must be practised once or twice a day, inserting about a grain of the altered Vaccine in the affected part. Actual Caution. The application of the actual Caution in Neuralgia is spoken of in the very highest terms by Balleit, applied, not with such severity as to induce ulceration and suppuration,
but merely so as to produce a certain amount of Super-
facial irritation of the skin. He recommends that it should be applied lightly over the trunk and the most painful points of the nerve affected, it not being necessary to apply it over all the pain-
ful spots, only the most troublesome. He says that very little inconvenience is caused to the patient by its application, and that, in the majority of cases, in a few days after a single application, the surface is completely healed and the patient very much if not altogether relieved of his pain. Sometimes however it may be necessary to practise a succession of cauterisations, a notable amendment taking place after each. Ballieux considers this the most useful of the whole class of counter-irritants so much used in Neuralgia and he says he has almost never seen any bad effects such as Erysipelas to follow its use. He cannot help thinking however that it must be difficult always to keep it within such bounds as that it shall not induce ulceration and suppuration and thus leave a cicatized mark. He need hardly say that the chance of an occurrence like this (especially when applied to the face) is a very serious objection
to its use. Narcotic Injections in Neuralgia —
This plan of treatment consists in the introduction of
opiates in some form or other into the cellular
 tissue as near as possible to the painful part of the
affected nerve by means of a small syringe.
The merit of introducing this method of healing
Neuralgia is due to Dr. Alexander Brook; and, after
extensive trial, it may now be considered as one of
the most efficient means we possess for treating
certain kinds of Neuralgia. It may be employed
in almost all forms of the affection, but it would
appear to be most useful in cases of tic douloureux
particularly when the supra-orbital is the branch
affected; also in that class of pains about the
periorbital and intercostal regions from which
young women are so often found to suffer:
and the seat of pains which may be much benefited
by this method is the abdominal variety: Such are
those Neuralgic pains which occur about the
region of the liver, or about the groin, or the
belly, where it comes down on the groin; but,
indeed, it may be resorted to, and often with
advantage, in all the forms of the affection;
and even when the Neuralgia is dependent upon
some organic cause which cannot be removed, still the temporary relief which may be thus afforded should not be denied the patient. The solution, we repeat, should be introduced as near as possible to the painful part of the affected nerve, while, as Valletz has pointed out, there is usually more or less tenderness on pressure even in the interval between the paroxysms of pain. The proper quantity to introduce is about 20 or 30 drops of the Sol. Morph. or of Batten's sedative solution or an equivalent quantity of some other preparation of Morphia, but of course the injections must be repeated at occasional intervals, taking care not to introduce the drug at the same spot each time. The advantages of this method of using narcotics are, that their effect is very pure and very speedily produced; they exert more benefit on the local affection than when given by the stomach, probably from being brought more directly in contact with the nerves which are the seat of the disease, and there is not apt to be so much constitutional irritation produced; on the other hand, there are disadvantages, such as the pain occasioned by the introduction of the fine cannula and the production of abscess from local inflammation; but the pain is comparatively so slight and the production of abscess so rare that
These are to be considered as but slight disadvantages; certainly not such as to stand in the way of the employment of so powerful a remedy. Section of the nerve - Simple division of the affected nerve is certainly of very little use in neuralgia; but, when other means have failed and if the patient be anxious that the operation should be tried we may excise a portion of the nerve affected to ensure its complete division and effectually prevent its reunion. It is obvious that this practice can only be of use when the disease is strictly local and when, with the excised portion of nerve, we take away that, the irritation of which was the cause of the neuralgia: When the disease is constitutional of course such a proceeding will be of no use whatever.

Suitable constitutional treatment is of paramount importance in all cases of neuralgia, and indeed, unless we attend to this, the most judiciously chosen local remedies will at best but afford but temporary relief. We must determine, if we care, in each case, whether there be any derangement of the constitution which may have originated the malady or which at least has the effect of greatly
aggravating it; in other words, we must carefully look out for a constitutional as well as a local cause, etc, if there be any particular organs at fault, as the stomach or intestinal canal, and address our remedies accordingly; having to deal with a case of Neuralgia, for instance, in a person with deranged stomach and bowels, it would be equally ineffectual and unscientific to treat purely by remedies thought to be more or less specific in Neuralgia and all the while neglect to rectify the derangement of those organs. Then we will carefully note whether the patient present any particular diathetic condition — if he be Rheumatic or Gouty — also if there be any syphilitic taint about his system: Neuralgias show themselves very often in those who are anemic and especially does this apply to females who have some marked menstrual derangement: our treatment we must direct accordingly, trying to enrich the blood and restore tone and vigour to the general constitution. Periodicity furnishes one of the most valuable indications in the treatment, and indeed, when there is a well marked periodicity in the attacks, we may count with some certainty on the efficacy
of particular remedies which will be afterwards mentioned; then, there is an element which very often enters into Neuralgia, and especially the Neuralgia of joints, as it affects females, namely Hysteria. In such a case as this, our remedies while directed to the improvement of the patient's bodily condition, must, as insisted on by Dr. Haycock, to a very great extent be directed towards the improvement of her mental state; trying by every means in our power to cheer the patient and induce her to take plenty exercise in the open air which she is often very unwilling to do. We will now proceed to enumerate the constitutional remedies which are most approved in the treatment of Neuralgia. Many many have been tried, and, in many cases we may be glad to try medicines which, though very frequently of no use, may succeed after others in general more useful, have failed. There is seldom or never need for constitutional blood letting in Neuralgia; indeed the class of people whom it affects can ill stand any such treatment being in the most part debilitated, weak and very often decidedly anemic. Purgatives: Whatever may be the
cause of a Semalgic affection, it is of much im-
portance that the patient be freely purged, for such
practice frequently has the effect of either banishing the
malady or at least of improving the condition of the
sufferer, and although it is unfortunately often of no
avail, still even in these cases it cannot do any harm.

The more powerful purgatives answer best; such as
broth oil and Jalap. Iron: Semalgia occurs
most frequently, as we have said, among the anemic
and those of debilitated constitution; in such we doubt
our "pumicium remedium" is the balsamic carbonate
of iron as recommended by Mr. Hutchinson, given
in doses of 10 or 20 grains or more twice a day after
food; some writers seem to think that this remedy has
almost a specific action, but others and apparently
with more propriety, refer its action to its effect in
enriching the blood and improving the general con-
dition of the body; in short, just its influence as a
Tonic. When the affection is distinctly periodic in
character, the employment of such antipericolic
remedies as Iminine and Arsenic is strongly in-
dicated and especially so when we can have the
complaint to a Malarial origin. The Iminine must
be given in larger doses than it is generally given in.
for ordinary tonic purposes, beginning with such a dose as 3/4 and gradually reducing it to 3, 4 or 5 grains twice a day. The Arsenic will be used in the form of the ordinary Fowler's Solution 3 to 5 minims of which may be given twice a day. 

Form: 

Arsenious: This remedy has been much commended by many writers and cases are recorded where it has been of service; it may be given in the form of the extract or the powder a grain of either of these being given every 6th or 8th hour. 

Opium: The employment of Opiates has been very differently thought of by various Physicians as a piece of practice in Neuralgia, some condemning them entirely on account of their tendency to constipate the bowels and induce general nervous irritability, while others approve of them and have recorded cases where a cure was effected by their use. Dr. Haycock speaks of a case of tic doloureux which he cured by administering a grain of the Acrate of Morphia every half hour until the pain was subdued, stopping the drug when the pain gave way and resuming it whenever it threatened to return. The relief in this case was permanent. 

There seems to be no reason why a remedy whose prominent effect is that of subduing Pain Should
not be brought to bear in the treatment of an affection whose main characteristic is pain; and even if the relief should not be permanent (although it evidently sometimes is) it is still much cruel to withhold Opium from the patient in the height of the pain. Dr. Rowland in his "Treatise on Neuralgia" speaks highly of this remedy. He has found it frequently successful, having used it in the form of the Alcoholic Extract in doses of 1/4 of a grain to a grain 3 or 4 times a day. He recommends that it should be employed chiefly in those of the hystero-lymphatic temperament and that it should be especially withheld in the case of hysterical females. The Tincture of Ammonia has been much used in France and Germany in the treatment of various nervous affections and, among these, of Neuralgia. It is given in doses of a teaspoonful 2, 3 or 4 times a day. Several French Writers speak of it as having afforded relief after the more ordinary remedies had failed. Muriate of Ammonia: This too is a remedy which has been much praised by some, given in doses of 3/5 to 1/4 of a grain every hour or two at first and gradually reduc-
The cure: it has been found most useful by many in those cases of Neuralgia which are attended by pain and swelling, doing good probably by acting as an indirect relaxant and lessening the arterial action. Cold-liver-oil: This valuable agent has also been found useful in all forms of Neuralgia, but especially so in Sciatica and Neuralgia of the Nerve. Many other remedies besides those mentioned have been used such as Aconite, Curcum,商Bunse Belladonna, etc.

Many regard this latter (Belladonna) as a very useful remedy.

Having thus considered Neuralgia as a general affection, this naturally leads us to a consideration of its particular kinds and it has been divided into many: but wherever it manifests itself, the same methods of diagnosis are available; it presents much the same general characters and we are guided by the same principles of treatment; therefore, and seeing that our space is limited, we will speak shortly of only two particular forms of the affection, namely, the Dolous or and, first, of Facial Neuralgia or the Dolous.
This is one of the most frequent as well as most severe of all the Neuralgias: its predisposing and exciting causes are much the same as those of Neuralgia in general. The course of the paroxysm is no more severe than already mentioned in the general history of the affection, commencing most frequently with a sensation of cold or heat over the affected parts, and occasional shivers of darting pain, these becoming more severe until the height of the paroxysm is reached. The pain which the victim of this affection suffers is often excruciating; such as that she is willing to submit to any measures that promise him the slightest chance of relief. It sometimes happens that this affection shows itself as one of the first indications of organic cerebral disease. Any of the 3 branches of the 5th pair of nerves may be affected: branches belonging to all the three may be affected at one time, but generally the filaments of one branch are implicated more than the others; as already said, the attack is ordinarily preceded by disagreeable sensations in the part as heat or cold: then comes the pain which, attacking one or other of the branches of
the nerve at its point of exit from the long
foramen, shoots along a greater or less number
of its branches, as for instance, when affecting
the frontal nerve, chiefly over the forehead, com-
menecing at the supra-orbital foramen; when
affecting the infra-orbital branch, commencing
at the infra-orbital foramen and spreading through
the cheeks, the upper lip, the alae nasi and lower
eyelid; sometimes attacking the teeth of the upper
jaw, the maxillary sinus, the palate and the
root of the tongue. When affecting the
inferior maxillary nerve, the pain begins at the
mental foramen and follows the ramifications
of the nerve distributed over the chin and lip;
or, passing through the it may attack the teeth
of the lower jaw, the side of the tongue, the cheek,
temple and ear. This branch of the 3rd is less
frequently affected than the others: the points at
which the various branches of the nerve emerge
from their long foramina where as Ballen has
shown, the pain generally starts and by pressing
on which we can very often induce a paroxysm.
In a certain number of cases, the organs in which
the branches of the nerves are distributed manifest
certain symptoms; thus, we may have photophobia, lacrimation and redness of the eye; or, more rarely, the nostril is hot and there is an abundant secretion of mucus; some patients experience noises and buzzing in the ear, others a dull pain at the roots of the hair. In some of the very violent cases there are convulsions, contortions and spasms of the face.

The person may cease suddenly, or gradually, leaving behind it a sensation of heat and fulness in the forehead, face and head. The malady may attack a person but once or twice, or it may attend upon him from time to time during his whole life. We will be little apt to confound this affection with any thing else if we pay attention to the number, extent and situation of the painful points, also to the effect which pressure has upon these and to the violence and course of the darting pains.

Treatment: The general principles of treatment in Neuralgia will be applicable in this particular form. It is one of the forms in which the subcutaneous injection of Morphia has been found most useful; it is also found very frequently to be much under the influence of antiperiodic
remedies such as Arsenic Internie, etc; it will be proper to try these in the first place, and if they fail to afford relief, then we may try in succession some of the many remedies (Drums) mentioned when treating of Neuralgia in general. As to the extraction of teeth, it may be stated that this proceeding is only justifiable when the cause of the paraesthesia can be fairly traced to one or more offending teeth. It certainly is not warrantable to extract both after too much mere speculation.

Next, a few words concerning Sciatica.

In this variety of Neuralgia, the pain generally starts from the Sphenoid notch and follows the course of the great sciatic nerve. It is a very frequent and apt to prove a very intractable form of the affection. It owes the same kind of predisposing and exciting causes as Neuralgia in general; it very often can be traced to prolonged exposure to cold; sometimes it is plainly a part of Rheumatism and, not at all infrequently it is due to pressure exercised upon the sciatic nerve within the pelvis.

Treatment: The first thing to be done when
Consulted for Sciatica is to ascertain that it is a painful affection of the Sciatic nerve with which we have to deal. There is one condition in particular from which we must carefully distinguish it, namely, Disease of the Hip Joint: and this we will do by attending to the following points: In Sciatica there is no pain felt on pressing the head of the bone upward against the Acetabulum, there is the absence of swelling and pain in the groin and we have pain on pressure over the sciatic nerve, especially on pressure over the "painful points" such as the Great Trochanter, the head of the Fibula etc.

Sometimes Sciatica is more an inflammatory than a Neuralgic Complaint, more a Rheumatism than a Neuralgia, and in such a case, as for instance when the pain has succeeded to a chill, it will bid defiance to all antineuralgic remedies and yield to antiphlogistic measures such as local bleeding and blistering. Then, in all Cases of Sciatica, Remembering that it may be due to the Accumulation of Peculent Matter in the Intestines, it is well to act upon
The lower bowel and, for this purpose, it is best to use such powerful purgatives as Aloes and Castor Oil. If the patient be of the Rheumatic or Spastick habit, then Acetate of Potash and Colchicum will be of much service when the affection is connected with irritation within the kidney as it sometimes is, the oil of Turpentine is sometimes a Serviceable remedy. and, lastly, when we have to deal with a purely Renal or disorder, we will then have recourse to the ordinary Antirhenal remedies. Cold Liver oil is often of use.

As to external applications: amongst the most useful of these is Boracic Ointment which should be heated to an extent which makes it very unpleasant for the finger to be held on the sinew, immediately in front of the handle, and then applied lightly and smartly over a great or a little portion of the course of the nerve; the pain of the application, though very smart, is not of long duration while the relief it affords from the irritation is often times very great.

Turpentine has been very much used in this form of Renalgia: This is a somewhat alveo
measure, but no doubt, is has often been observed to do much good: The application of Conium's Caustic however is surely not. Such a formidable measure and there is, one would think, no reason why it should not be quite as effectual, seeing that Conium-irritation is the real agent in both cases and we can regulate the amount of this when we use the Caustic by the degree to which we heat it and the fineness or lowness with which we apply it.

Sulphur is a popular remedy for Rheumatism, the affected limb being swathed in flannel which has been lightly sprinkled with precipitated sulphur.

Sciatica is associated in not a few instances with sudden tubercular symptoms: tubercle often follows long standing Sciatica; whether from mere debility or not it is difficult to say.

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