

give rise to alarming symptoms. It cannot under these circumstances surprise that so valuable a hæmostatic, since its introduction ten years ago, figures now as an indispensable remedy. From the literature of the last year it may suffice to briefly review some comments.

Isenburg secured excellent results by the internal administration of stypticine in purely climacteric hæmorrhage, menorrhagia arising from defective involution after parturition or miscarriage, profuse menstrual bleeding, grave cases of hæmoptysis and hæmaturia. He employed doses up to 0.3 grm. (= 6 tablets) per day.

The excellent action of stypticin in uterine hæmorrhage is confirmed by Zoppeli, Boldt and Chase. Zoppeli employed it also with advantage prophylactically in uterine curetting as a means of preventing hæmorrhage. According to his experience it surpasses the older customary hæmostatics, such as *secale cornutum*, ergotin, gallic acid, hydrastinin *hamamelis* and adrenalin, since it is not so toxic as some of these and, in addition, endowed with anodyne properties so as to exercise a beneficial influence upon the pains which frequently accompany various forms of hæmorrhage, dysmenorrhœa, etc. Even prolonged use does not entail inconveniences. Zoppeli has even found its efficacy to rise under these circumstances, the hæmorrhage diminishing in duration and intensity.

In cases of hæmorrhage after miscarriage, where curetting appears inadvisable the latter may be averted by a combined use of stypticin and hydrastinin.

Chase gives the following formula for this purpose:

Rp. Hydrastinin. hydrochlor. . .	0.06 grm. (gr. 1)
Stypticin . . . . .	0.36 grm. (gr. 5½)
Syrupi rubi idæi . . . . .	7.5 grm. (gr. 125)
Elixir. simpl. q. s. ad. . . . .	30.0 grm. (oz. 1)
1 teaspoonful to be given every 2 or 3 hours.	

The combination of stypticin and hydrastinin has the advantage that the properties of the two media are mutually complementary, the former being enduring, the latter prompt in action. Stypticin and hydrastinin may also be applied subcutaneously in case a prompt action should be desired.

The application of stypticin in dental surgery is commented on by Levy and Klein. It effectually stops bleeding and after-bleeding, when applied in a suitable manner to the bleeding part in the form of a powder, gauze or wadding. It may also be administered internally in cases where extraction of teeth are