

A PECULIAR SPUTUM IN HYSTERIA.—Dr. E. Wagner has called attention to a peculiar sputum often observed by him in hysterical patients, the appearance of which might readily excite the suspicion that a phthisical affection is to be dealt with. But in fact it has been observed invariably as coming from subjects (always hysterical) who show no symptomatology by which tuberculosis of the lungs may be confirmed. The sputum is, of course, free from bacilli, is of a hemorrhagic nature, mostly red, but of a lighter red than ordinary bloody sputum, and not in any way resembling ordinary rusty-colored sputum. When examined in a glass it appears like a reddish or brownish-red pulp, in which numerous small gray particles cover the bottom. This sediment is so characteristic that it is easy to make the diagnosis with the naked eye. In one case the sputum for several days, in color and consistence, resembled a raspberry jelly, so that he suspected the development of a sarcoma or carcinoma in the bronchial tubes, under which circumstances it is usual to see this character of sputum. Under the quantities of small red blood-corpuscles, and along with them, frequently, numerous white blood-corpuscles, pavement epithelium, and cocci. Alveolar epithelia from the lungs were not discovered. Sometimes mucus pockets are found embracing pus cells. In every case, upon failure to find signs of disease of the lung or larynx, the author believes he has a right to conclude that the bloody coloring proceeds from small bleeding vessels, that the colorless part of the sputum is a pathological secretion of the mucous membrane, and that probably it all originates in the buccal cavity. The writer reports four cases in which he had observed this sputum for a considerable length of time; in one of which, however, bacilli at length appeared. In all cases an investigation for bacilli is of prime importance with a view to differential diagnosis.—*Deutsche Med. Zeitung.*

BISMUTH SUBNITRATE IN FETID PERSPIRATION OF THE FEET.—Vieusse recommends the subnitrate of bismuth in the treatment of fetid perspiration of the feet, and concludes as follows:—(1) Profuse perspiration of the feet, whether accompanied by pain or foetidity, is easily cured by the application with slight friction of subnitrate of bismuth upon the diseased parts. (2) In opposition to the opinion generally held, according to which the suppression of exaggerated perspiration may produce numerous accidents of metastasis, observation shows that the cure of this affection has not been followed by unfavourable results, and that if these are observed they should be attributed to other methods of treatment hitherto employed. (3) In the cure of this disease, subnitrate of bismuth appears to exercise a purely local action, rendering the superficial cuticular structures firmer and more resistant. The remedy, perhaps, exerts an action

also upon the sudoriparous glands and sebaceous follicles, changing the quality and quantity of their products, and possibly as a result of the changes produced in the part with which it comes in relation, modifies more or less profoundly the capillary circulation. (4) In certain cases the remedy suppresses only temporarily the profuse perspiration of the feet, but causes the fetid odour, as well as the pain, which is the consequence of the exaggerated secretion, to disappear permanently. (*Rivista Internazionale di Medicina e Chirurgia*)

A YOUNG doctor was recently purchasing a stock of drugs from one of our retail druggists, "I shall want a good supply of calomel," said he, "give me a pound—the dose is a drachm, you know." Posological views of this kind are by no means uncommon, and well it is that the druggist generally bars the way to their being fully carried into practice. Experience, not always purchased at the expense of the young practitioner, and not unfrequently to the benefit of the undertaker, generally rectifies these errors, but this is not always the case. Peculiar opinions as to chemical, pharmacal and therapeutical matters are sometimes held by practitioners of more mature practice. One of the best instances we have ever seen is furnished by a correspondent not a hundred miles from—Ont., who sends the original of a prescription received by him last month. It reads as follows:

"R Hydrarg. Ch Cor	3ij.
Rhei pl.	3ij.
Mur. Ferri.	3j.

Into four powders; one taken last thing bed time, one first in the morning until all are taken."

It is hard on the poor druggist to set aside all his notions as to the nature and doses of the ingredients ordered, but to require the unfortunate patient, who has already taken his quietus at bed time, to recommence the powders, "one first in the morning until all are taken," making, in fact, a regular breakfast of it is altogether unreasonable and unnecessarily unkind.—*Canadian Pharm. Journ.*

HEADACHE IN SCHOOL CHILDREN.—Prof. N. J. Bystroff has examined seven thousand four hundred and seventy-eight boys and girls in the St. Petersburg schools, during the last five years, and found headache in eight hundred and sixty-eight; that is, 11.6 per cent. He states that the percentage of headache increases almost in a direct progression with the age of the children, as well as with the number of hours occupied by them for mental labor; thus, while headache occurred in only five per cent. of the children aged eight, it attacked from twenty-eight to forty per cent. of the pupils aged from fourteen to eighteen. The author argues that an essential cause of obstinate headache in school children is the excessive mental