ounce of brandy two or three times. Two day later the mother brought her back to have the examination of the eyes completed. She said that all that night the girl raved and was out of her head, and it was only two days after the use of the drug that she seemed to have fully recovered. Two other cases came under notice only a day or two later, both occurring in healthy adult females in whom the symptoms were the same, but less in degree. In addition, both of these complained of dryness of the fauces. Here, too, the toxic symptoms did not pass off before twenty-four hours in one case, and in the other, forty-eight hours. In all of these cases, as the drug was given to be used at home, and a larger quantity prescribed than was needed, more than one drop may have been used, and it may even have run over the face into the mouth. At all events, it seemed significant that these symptoms occurred only when the drug was used by the patients themselves. The number of instillations, too, were more than were used at the clinic.

The other cases in which I have used this drug have been mostly in ulcers of the cornea of different types. In one case of serpent ulcer, just the kind in which it is said to be so efficacious, it was noted that scopolamine was used for two days, but the eye was so irritated by it that atropine had to be substituted. In all other affections of the cornea in which it was used, there was a very beneficial effect noted, especially so in one case of suppurative keratitis of traumatic origin, in which the healing occurred in a few days. In quite a number of cases of phlyctenular keratitis, too, it acted very promptly. In one case of keratoiritis the mydriatic effect of the drug was very quick, marked and satisfactory. I have not yet tried it in cases of iritis of severe type, or in any case in which there was a tendency to increase in intra-ocular tension, and, consequently, cannot confirm or deny the very important observation made by the authors quoted, that it does not increase intra-ocular tension. If this shall be confirmed, however, by future experience and observation, we shall have a drug of inestimable value in ocular therapeutics. I am anxious, too, to try it in cases in which atropine produces the severe form of conjunctivitis which we call "atropine poisoning," for, from the positive statements made, we may hope that it will not only supersede atropine in these cases, but will also have a favorable effect on its cure when it has already occurred.

My conclusions, then, from my brief trial of scopolamine are: That it is of value as a mydriatic and cycloplegic in the examination of anomalies of refraction; that its action is more complete than homatropine and of about the same duration, and better than sulphate of atropine because its effects pass off sooner; that it is open to the objection, if my observation should be confirmed by wider experience, that it produces toxic effects oftener than homatropine in spite of statements to the contrary; that the temporary amblyopia sometimes induced does not seem to be of much moment; that in cases of short attacks of inflammation of the cornea, especially in some of the suppurative type, it is of special value.

The tendency of the profession to vaunt the therapeutic value of a new drug is well known, and many instances in which those who were loudest in their praises of it soon become equally pronounced in their condemnation, must occur to all of us. That scopolamine, as we have quoted from one of the authors, will soon replace atropine in the practice of ophthalmology is not so well assured, but that it may prove a very valuable addition to the list of mydriatics which we now have, seems to be altogether likely, and we await with interest further details of experience and observation from our colleagues.

SEVERE BRAIN INJURY, WITH RECOVERY.

BY A. N. HOTSON, M.D., INNERKIP, ONT.

On Sept. 30th, '93, at 6.30 p.m., C. P., a farmer, æt. 22, healthy, had never used tobacco nor alcohol, was kicked by a colt on the right temple, crushing in the skull, tearing the membranes and scattering the brain matter about. Ten minutes later I saw the case and had him carried into the house. He was unconscious, respirations scarcely perceptible, accompanied about every half minute by a deeper respiration, pulse very slow and feeble, extremities cold, pupils natural size but fixed.

Wound in scalp was shape of hoof—1½ inches by 2½ inches—the long diameter being nearly vertical. Cleansed the wound, removing a num-