Canadian Journal of Medicine and Surgery.

or a warm solution of common salt. The atomizer is far superior to the douche, because its spray easily reaches every part of the air passages, and by the use of the recurrent spray tip all accumulated secretions in the pharyngeal vault and the posterior nares can be more thoroughly removed than in any other way. This method of cleansing the nasal passages should be repeated from two to four times a day in all cases of chronic catarrh. A thorough cleansing having been accomplished, the parts are then ready for the proper medication.

In a practice covering more than twenty-five years I have used a large number of remedies in the treatment of catarrhal conditions, only to find none that were reliable until my attention was called to protargol.

The large majority of cases coming under treatment require a mild, non-irritating disinfectant and astringent, and none better has yet been presented than protargol. In the past silver nitrate has probably accomplished more in curing chronic catarrhal conditions than all other remedies combined, yet it has two serious drawbacks. It is entirely too irritating, which defect prohibits its use in many cases otherwise perfectly adapted to it. Owing to the ease with which it combines with the albuminous elements of the secretions and the surface epithelia, its action, besides being harsh and irritating, is too superficial to be s.tisfactory. Is unsightly stains of the skin and clothing are also highly objectionable.

In protargol we have a proteid silver salt which overcomes both of the objections to the nitrate. It acts without producing irritation; even the transient burning sensation following its use can be very greatly lessened by the addition of some bicarbonate of soda to its solution. It shows no tendency to coagulate albumin, and therefore manifests in full its theraveutic effect. Neither is it escharotic, and yet it acts deeply upon the mucous membrane as a powerful disinfectant and alterative, quickly arresting suppuration and ulceration in almost all cases. Fresh stains of protargol are instantly removed by washing in water; stains that have become dry are readily removed by sodium thiosulphate Its solutions are stable, being unor ammonium persulphate. In short, protargol fills in an affected by light, air, or heat. eminently satisfactory manner " a long-felt want " in the management of catarrh.

Post-nasal catarrh is best treated by a two to five or six per cent. solution, applied by a recurrent spray, the addition of soda bicarb. being in my experience very agreeable and satisfactory. Occasionally, though very rarely, a case will do better on a one per cent. solution, and I have never used a solution of greater strength than six per cent. to the nose or throat.

369