

very often secondary, consequently extirpation has no effect upon the primitive cause but is only a palliative measure.

2. Extirpation favors metastasis. Though this is a rare complication it cannot be ignored. It is due, in these cases, to inoculation sustained during the operation.

3. Even if extirpation is adopted from choice one is, however, obliged sometimes to abandon it when the number of glands is very great, although I have removed sixty-two in a single subject.

4. It is claimed that the cicatrices from incisions are unduly prominent but they are not retracted and hence do not greatly disfigure the parts.

5. Recurrence is very frequent. This is the greatest objection. It is true that relapse occurs in 25 to 50 per cent. Moreover, when the adhesions are strong, and when total removal is difficult, this procedure becomes less necessary. When suppuration is very free curetting is preferable.

When Should one Perform Extirpation?—When internal medication has failed. When the glands involve the face and by their great size produce severe deformity.

When they are isolated and not numerous.

When they have undergone fibrous degeneration.

When they are not freely suppurating.

General Contra-Indications.—Impaired general health when there exist tubercular deposits in the lungs and joints. In such cases relapse is almost inevitable.

When the ramifications of the glandular chain are very extensive, badly placed and difficult to reach, relapse is probable.—Prof. Le Dentu in *New Eng. Med. Monthly*

CALOMEL AS A SUBSTITUTE FOR IODOFORM.—An Italian physician, Dr. G. B. Percacini, is in the habit of replacing iodoform by calomel for dressing all kinds of wounds and sores, more particularly ulcers of the leg, as well as eczematous resisting ordinary treatment. Where applied, in the form of powder, to a wound which has first been thoroughly cleansed, this substance forms an antiseptic crust, strongly adherent, and when this becomes detached the wound is found to be completely citrized. According to Dr. Percacini, the use of protochloride of mercury for dressings is contra-indicated only in cases of wounds and sores with excessive secretion, seeing that in such cases the pus would be retained under the crust formed by the powdered calomel.—*Med. and Surg. Rep.*

MASSAGE IN THE TREATMENT OF ACNE OF THE FACE.—In a communication made to the Dermatological Society of Moscow (*Dermatologische Zeit-*

schrift, Band ii. Heft 3), Pospelow calls attention to the good results which he has obtained from massage of the skin of the face in the treatment of acne in this situation. By means of massage the lessened tone of the skin, and especially of the sebaceous glands, is increased, and the thickened sebaceous matter expressed from the ducts of the glands. The rubbing should not be done at random, but should follow the direction of the gland ducts and the muscle-fibres of the skin in order that the sebum may be expressed from the glands. Massage should be done for ten minutes at a time, morning and evening, for several months, until the tone of the skin is restored and the openings of the sebaceous glands have diminished to their normal size.—*Am. Jour. Med. Science.*

IDIO SKULLS.—Sir George Humphrey has examined nineteen specimens of idiot skulls, and finds nothing to suggest that the deficiency in the development of the skull was the leading feature in the deformity, and that the smallness of the bony cerebral envelope exerted a depressing or dwarfing influence upon the brain, or anything to give encouragement to the practice lately adopted, in some instances, of the removal of a part of the bony case, with the idea of affording more space and freedom for the growth of the brain.—*Lancet.*

PROFESSIONAL OPINIONS OF INGLUVIN.—Edward Warren (Bey) M.D., C.M.:—"Hereafter I shall prescribe Ingluvine liberally and with great confidence in its therapeutic value."

Charles Low, M.R.C.S.E., etc.:—"Medical men will never regret using Ingluvine."

Edward Cotten, D.N., C.P.P., London:—"Ingluvine is particularly efficacious in vomiting produced by pregnancy."

Waldo Briggs, M.D.:—"I have used Ingluvine extensively and find it far superior to any remedies for vomiting of pregnancy, dyspepsia and indigestion."

CAROTID ANEURYSM.—Two cases of aneurysm, at the root of the neck, both right-sided, presumably carotid, came under the notice of Doctor S. Solis-Cohen. Treatment consisted in rest and the administration of sixty grains daily of hydrated Chloride of Calcium. Marked improvement occurred in one case—the same as was observed in a case of innominate aneurysm that came under the Doctor's care two years ago. In the other case no change has yet been noticed.—*Philadelphia Polyclinic.*

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