

furnish the cases of phthisis and lupus which have occurred during, say, ten years; and, conversely, they might well inquire whether in any of the relatives of phthisical patients cases of lupus or other form of local disease of supposed tubercular origin existed. Investigations on these and similar lines would settle this much-vexed question in a way that would be found impossible by any individual observer.—*London Lancet. American Practitioner.*

TREATMENT OF "COLDS" BY SODIUM SALICYLATE.

In a recent number of the *Memphis Medical Journal* the claim is made that salicylate of sodium is as equally efficacious in the treatment of bad colds as it is in tonsillitis. A prescription of half an ounce of salicylate of sodium with half an ounce of syrup of orange peel, and enough mint-water to make four ounces, is recommended in the dose of a dessertspoonful every three or four hours, until the specific action of the salicylate—that is, ringing in the ears—is produced. It is claimed that aching in the brow, the eyes, the nose, together with the sneezing and the nasal discharge, will then cease, and will entirely disappear in a few days, not leaving, as is usually the case, cough from the extension of the inflammation to the bronchial tubes.

PHENACETIN AS A HYPNOTIC.

It is almost insoluble in water, soluble in alcohol, almost tasteless, may be given like sulfonal, in wafers and compressed tablets, as a powder or with brandy. As an antipyretic and neuralgic it is not as potent as antipyrin and antifebrin, but it is much less a cardiac depressant. In the insomnia of overwork, of nervous irritation, in febrile states, or from headache, it is a hypnotic of great value, in doses of five or ten grains, repeated if necessary. In sleeplessness of intense neuralgia, less than a gramme, repeated two or three times, as needed, is not likely to be effectual, the fact having been first ascertained that there is no intolerance of the drug.—*Boston Medical and Surgical Journal.*

EARLY LAPAROTOMY FOR CATARRHAL AND ULCERATIVE APPENDICITIS.

Professor Senn concludes as follows:

1. All cases of catarrhal and ulcerative appendicitis should be treated by laparotomy and excision of the appendix, as soon as the lesion can be recognized.

2. Excision of the appendix, in cases of simple uncomplicated appendicitis, is one of the easiest and safest of all intra-abdominal operations.

3. Excision of the appendix in cases of appendicitis, before perforation has occurred, is both a curative and prophylactic measure.

4. The most constant and reliable symptoms indicating the existence of appendicitis, are recurring pains and circumscribed tenderness in the region of the appendix.

5. All operations on the appendix should be done through a straight incision parallel to and directly over the cæcum.

6. The stump after excision of the appendix should be carefully disinfected, iodoformized, and covered with peritoneum by suturing the serous surface of the cæcum on each side over it with a number of Lembert stitches.

7. The abdominal incision should be closed by two rows of sutures, the first embracing the peritoneum, and the second the remaining structures of the margins of the wound.

8. Drainage in such cases is unnecessary, and should be dispensed with.—*Jour. Am. Med. Assn.*

ANTIPYRIN IN CHOREA.

In a paper recently read before the Société Médicales des Hôpitaux de Paris (*Bull et Mém.* December 25, 1890), Dr. Charles Legroux states the results of the treatment of chorea by antipyrin in sixty cases observed throughout their course. He found that antipyrin had a beneficial effect in two-thirds of the cases, rapidly diminishing the intensity of the disease, and shortening its duration; recurrence, however, took place in three-fifths of the cases. In the cases in which the drug failed this was found to be due in some instances to intolerance (vomiting, diarrhoea, etc.), or to cutaneous eruptions; in a few cases the drug appeared to have no effect on the disease. He found it necessary to give large doses, and to reach the maximum dose in a short time. Between the age of six and fifteen doses as high as three to six grammes (about ʒ iss to ʒiij) a day were well tolerated for several weeks. Serious symptoms of poisoning were never observed, and in some cases in which an eruption or vomiting was at first noticed, when the use of the drug was resumed after a short interval these symptoms did not recur. None of the cases treated had any rheumatic symptoms, but none were of a serious character.—*Supp. British Med. Journal.*

ointment for COMEDONES.—The *Canadian Pharmaceutical Journal* quotes the following prescription, said to be used by Unna in the treatment of comedones:

R.—Solution of hydrogen	} of each 2 ounces.
peroxide	
Vaseline	
Lanolin	1 ounce,
Acetic acid	1 drachm,
Mix and perfume.	