take place when the lead nipple-shields are used. The great advantages of the system proposed are simplicity and cheapness, though, as regards the former, I think it must yield the palm to the elastic bandage. It would appear that in some parts of Africa the natives use sheet copper, and with some success, but I cannot say I have ever tried it myself.—F. P. Atkinson, M.D., in London Practitioner.

ON NIGHT COUGH.

Dr. R. E. Thompson says, in the *Practitioner*—
There is a very persistent and harassing form of cough which accompanies many forms of pulmonary disease—phthisis, bronchitis, and others—which appears to be an undeveloped, modified form of asthma.

The patient complains of being much disturbed, at night especially, or early in the morning, and it is generally worse when the patient lies down and goes to bed. No narcotics in ordinary use for cough appear to have any effect and it is only by asthmatic remedies that any relief is obtained. Many cases of this kind have now come under my notice which formerly used to trouble me not a little from the constant complaint that was made as to the distress arising from this obstinate night cough, and the ineffectual result of opiates. In all those cases of this kind which I have lately investigated, there was a decided history of inherited asthma; but it will be sufficient if I quote two cases out of the number.

A lady, who had been confined three weeks, consulted me about a very persistant and harassing cough which kept her awake through the night. For this various remedies had previously been tried, opiates chiefly, without the slightest alleviation. A year before this her younger sister had applied to me for advice for a fully developed asthma, which was treated successfully by asthmatic specifics. The remembrance of this gave a clue to the case, and investigation proved that asthma had been inherited from a grandparent, the father and mother of the patient having been perfectly free from pulmonary complaints. Relief was at once obtained by Joy's cigarettes, which are often extremely useful in like cases.

A young lad, aged nine, was brought to me for advice respecting a persistent cough with which he had been troubled since an attack of measles, eight months before. On examining him, I found a thickened condition of the alveolar tissue and harshness of respiratory murmer, which appeared to depend upon an old condition of broncho-pneumonia. I ordered him some codliver oil and lactuca for his cough, but finding that the cough was still very troublesome, especially at night, I conjectured that the case was one of undeveloped asthma, and on investigation I found that the grandfather had been subject to In this case the burning of nitre-paasthma. pers removed the cough at once.

LATE SUGGESTIONS ON OZÆNA

Dr. Frankel, in Virchow's Archiv, volume LXXXV, gives a number of cases which he thinks will confirm the views of those who believe that ozæna always owes its origin to a dyscrasia—two of his patients were pythisical, two syphilitic—but does not believe, though admitting the frequent coincidence of ozæna with pharyngitis sicca, that both the diseases are in causal connection with each other.

In an Italian contemporary, Dr. Massei, starting from the theory of a parasitic origin of ozena, recommends the following treatment: a. Gradual dilatation of the obilterated nasal passages by means of elastic bougies; b. Clearing and disinfection of diseased regions by a very weak solution of salcylic acid (1 part 500 parts of water), applied by means of a syringe; c. Modifying local medication, by blowing calomel powder through a nasal speculum on the ulcerated surfaces. The author says that there is always an arrest in the process of healing at a certain period, but advises strongly not to give up this treatment, but to continue it patiently until total cure is obtained.

In the Memorabilien, Dr. Dawosky describes his successful treatment of that form of ozena called punaisie (in German, stinknase). He carefully removes all crusts, washes the mucous membrane with a two per cent. solution of silver nitrate, and every evening tampons the nostril with a plug of charpie as thick as the finger, moistened with glycerine and that thickly dusted with powdered alum. In the morning this is removed and nostril washed with injections of permanganate of potash or zine, in weak solution. The odor soon disappears, and by persistence a cure is effected.

COUGH MIXTURE.

J. Milner Fothergill says hydrobromic acid, with spirit of chloroform and syrup of squill—and if the case be that of a very agreeable lady, and a favorite patient, a few drops of spirit of nutmeg be added—constitutes an excellent and palatable cough medicine.

— Western Lancet.

CHOLERA INFANTUM.

During the summer of 1873, I was called to prescribe for a child two years old, supposed by the physician in attendance to be dying, the disease being diagnosed as cholera infantum. My prescription was one ripe strawberry every hour till better. The child speedily recovered. Three months after, I was asked to prescribe for another child aged eleven months. The disease this time was really cholera infantum. One-half strawberry every hour proved a successful treatment. This child had also been given up to die.—Boston Journal of Chemitry.