

From *Lo Sperimentale*.

# UNILATERAL LUXATION OF THE 5TH CERVICAL VERTEBRA BY MUSCULAR ACTION.

BY VOELKER.

(*Gazz. delle Clin.*)

A strong workman bearing a weight upon his back, as was his custom, heard a crepitation in his neck and became unable to straighten his head: he experienced painful cramps which radiated from the nucha along his right arm. The head was inclined to the left, and its movements were restricted and painful. The muscles were markedly prominent on the right side of the neck, where they presented a rounder outline than on the left. The line of the spinal apophyses presented no sensible deviation: the 5th spinous apophysis was painful to pressure; and at this level on the right could be felt a slight projection which was continuous with the spine and was deeply situated between the trapezius and sterno-mastoid; on the left, on the other hand, there was a depression. Voelker raised the head of the patient, inclined it strongly to the left, and then impressed upon it a movement of rotation to the right; a click was heard, and restitution was accomplished and maintained. The diagnosis of luxation of the 5th cervical vertebra, unilateral and produced by muscular action, was confirmed by the facility of reduction.

From *La France Médicale*.

ON THE INVERSE TYPE OF TEMPERATURE AS A SYMPTOM OF MILIARY TUBERCULOSIS.—The inverse type of the body temperature, that is to say, a high degree in the morning and a lower one at night, is a symptom of great clinical value in the diagnosis of miliary tuberculosis, either acute or consecutive to caseous pneumonia. Out of seventy-one subjects dead from phthisis, Prof. Prunniche has noted this type of temperature in the proportion of 63 per cent.

In the subjects who had succumbed to caseous pneumonia without miliary tubercles the proportion was 25 per cent., whilst in the caseous pneumonias with miliary tubercles the proportion rose to 85 per cent.—*II Morgagni*.

From *L'Union Médicale*.

## TREATMENT OF EPISTAXIS.—(KEETLEY.)

In cases of epistaxis, which are more troublesome than dangerous, and which almost always appear at an inconvenient moment, the author recommends lotions of hot water to the face and nose, and declares that he has obtained better effects from them than from cold water. He thinks that the hot water acts simply by diminishing the congestion of the mucous membrane, which is the primary cause of the majority of epistaxes. It is, of course, understood that this means is not applicable to those serious cases which require plugging.

In several cases in which the tampon, as well as the perchloride of iron have failed, Dr. George has succeeded in arresting the bleeding by prescribing the internal use of the extract of ergot of rye. Every quarter hour until the epistaxis ceases he administers a draught containing 15 minims of the liquid extract of ergot, (about 60 centigrammes, or 9 grains.) Even then, after the hæmorrhage is arrested, the patient should continue to take the same dose every quarter of an hour for a day or two. The author cites three observations in support of this mode of treatment.

From *Le Progrès Médical*.

At the *Société de Biologie*, on the 1st June, M. Albert Robin pointed out two unknown characters of the urine of interstitial nephritis. 1st. The presence in this liquid of a notable quantity of urohæmatine. 2nd. The existence, under the microscope, of crystalline, or amorphous pigmentary masses, and of garnet masses, probably formed of hæmatoidine.

It is interesting to compare these characters, observed in interstitial nephritis, with the urine of active globular denutrition.

From *L'Union Médicale*.

## THE GASTRIC JUICE.

At the *Académie de Médecine*, on the 11th of March, M. Berthelot communicated a note from M. Richet, jun., upon the nature of the gastric juice which appears to be a chlorhydrate of leucine. M. Richet has succeeded in isolating the crystallized leucine. There, therefore, remains no doubt in this respect, and the question may be considered settled.