

to the neck, a quiet and dark room and a mixture containing five minims of tincture of belladonna in a little water, every four hours. The case went on till a state of complete opisthotonos supervened with occasional spasmodic seizures, during which he became cyanotic. Nutrient enemata took the place of stomach feeding on account of the difficulty he now experienced in swallowing. The mixture was now changed to one consisting of ten minims of spt. sulphuric ether, three of chloroform, and three of tinct. digitalis in a drachm of water, with lin. belladonnæ to the spine. On the twelfth day he began to improve. This improvement continued till at the end of about a month and a half he was up and well. The writer thinks that pieces of grass fibre which had been left in the wound when first dressed by the lad's mother, and which were discharged at two separate times, were the potent factors in causing the mischief. The case is interesting as a recovery from a genuine case of tetanus, but how does the theory of the presence of grass fibre in the wound, accord with the now rather prevalent idea, that tetanus is a specific disease?

SODIUM SALICYLATE IN THE TREATMENT OF CHOREA.—Dr. Dresch, in an article in the *Bulletin Général de Therap.*, speaks very highly of the action of salicylate of sodium in cases of chorea. He says the disease is of greater gravity than is generally supposed, and is not infrequently, directly or indirectly, the cause of death. He believes chorea is a microbial disease, the micro-organism of which, is probably of the same family as that of rheumatism. Energetic treatment should be begun at the earliest possible moment. The drug is administered because of its action upon the medulla and cord, where it affects the motor centres as well as the sensory, and not because of any special action as a germicide or anti-rheumatic. Apart from the sedative action of this drug, it possesses another great advantage, in that it increases the elimination of waste products. As it is evident that the choreic movements must greatly augment the amount of waste products, it is of the utmost importance, that any remedy given for the disease should favor the elimination of these materials by the kidneys and other enuncitories. The salicylate is well borne in most cases, a child of twelve years taking with-

out trouble as much as sixty grains in twenty-four hours, the only precaution being to give the drug in small and frequently repeated doses, well diluted with slightly alkaline water. It is not usually necessary to continue the use of the drug more than eight or ten days. Rest in bed, a well-ventilated room, avoidance of noise, and a milk diet are all of assistance in promoting the beneficial action of the drug.

THE PASTEUR INSTITUTE AT NEW YORK.—Dr. Paul Gibier, Director of the New York Pasteur Institute, sends us the following results of the preventive inoculations against hydrophobia, performed at the above Institute since its opening in February, 1890:—610 persons, having been bitten by dogs or cats, came to be treated. In the case of 480 of these persons it was demonstrated that the animals which attacked them were not mad. Consequently the patients were sent back after having had their wounds attended, during the proper length of time, when treatment was necessary. In 130 cases the anti-hydrophobic treatment was applied, hydrophobia having been demonstrated by veterinary examination of the animals which inflicted bites or by the inoculation in the laboratory, and in many cases by the death of some other persons or animals bitten by the same dogs. In every case the treatment was successful, all of the patients being at present in good health. The applicants were from twenty States and Territories and one from Ontario.

IODOFORM INJECTIONS IN THE TREATMENT OF COLD ABSCESS.—Dr. Jasinski, of Cracon (*Lancet*), has treated eighty-six cases of cold abscess by means of injections through a trocar of iodoform emulsion, with encouraging results. A certain number were cured by a single injection, others after two or three injections. In eleven cases after the injection the abscess broke, a large quantity of pus mixed with iodoform being discharged. These were all cured without any further surgical interference. In nineteen cases an incision had to be made, the cavity was then washed with carbolyzed water, iodoform emulsion injected, and the wound sewed up after a drainage-tube had been inserted. In some of these cases, the injection had to be repeated several times. Though 180 grammes of a ten per cent. emulsion were injected at once, no toxic symptoms were ever observed.