

Bodily symptoms mostly prevail, such as pains in the limbs, head pressure, slight difficulty in speech, etc. There is sleeplessness, loss of appetite, constipation. Years may pass, the patient improving a little. Later the mental symptoms become more marked. The patient is abnormally irritable or indifferent. He may become extravagant. The impaired intelligence is obvious. Unequal pupils, speech troubles, facial paresis supervene. For oncoming melancholia or mania, removal to a suitable institution is best, and also for acute paranoia. The percentage of recoveries may thus be increased. Drugs should be given only under constant supervision. For chronic paranoia change of scene, hydrotherapy, etc., should be recommended, and removal to an institution only when the patient is unmanageable, or the home conditions unsatisfactory. An early general paralytic is treated in the same way, but the strictest supervision is required.

PIPERAZINE AS A URIC ACID SOLVENT.—Confirmatory evidence (*Med. Summary*) of the utility of piperazine as a solvent for uric acid in the body has recently been afforded by the experiments of Dr. Rosenthal on animals, *Medicine Post*. These experiments consisted in producing deposits of uric acid in the heart, pericardium in the bladder and kidneys, and then administering piperazine in doses of 0.75 gramme by the mouth or subcutaneously. After a period varying from two to seven days, the animals were killed, and in all of those which had been treated with the remedy a complete disappearance of the uratic deposits was observed. On the other hand, the control animals which had been treated with borax, phosphate of sodium and lithia, exhibited considerable collections of uric acid in the different organs. On the ground of these experiments, Rosenthal regards piperazine as the most reliable solvent for uric acid. Albuminuria was never observed. Dr. Blanc, *American Journal of the Medical Sciences*, April, 1874, also states that "theoretically the use of piperazine is very encouraging. An alkaloid of the pyridine group, it is not poisonous nor irritant. The combination of urate of soda and this drug is nearly nine times more soluble than the urate of lithia. Vogt has found that under fifteen grain daily doses the amount of urates is decreased, while that of urea increases.

This goes to show that not only does this drug dissolve urates, but it is an oxidizing agent and modifies tissue change. On the other hand, the nitrogen which is eliminated is not increased, which shows that there is no increase of waste nor supplementary decomposition of albuminoids. Piperazine has been strongly recommended for gout, in that it relieves the pain, frees the engorged joints, and expels renal calculi. Patients who have suffered from nephritic colic, some days after the drug experience a recrudescence of the pain, which is followed by the expulsion of a large calculus which has apparently been diminished in size by the action of the drug. In this respect it appears to act with less danger than do the alkalies, and more rapidly than the flushing out of the kidneys with mineral waters." Piperazine-Bayer is a chemically pure preparation, and is furnished in half-ounce and ounce vials, and also in tubes of ten tablets, each tablet containing sixteen grains, which is an average daily dose.

DEATH FROM HÆMORRHAGE AFTER TOOTH EXTRACTION.—Dr. Elliott Bates, (*Annals of Surgery*) reports an interesting case showing the profound respect with which the surgeon should regard all cases of hæmophilia. The patient was a man aged twenty-five years, who had been delicate from childhood, suffering at intervals from painful joints and digestive troubles. On one occasion in childhood a slight accident resulted in profuse hæmorrhage, and twice he nearly lost his life on account of hæmorrhage after extraction of a tooth. He determined, however, to risk it a third time. Gas was administered and the tooth removed. Hæmorrhage followed, but diminished steadily after the cavity had been packed. It returned, however, during the night, and in the morning the patient was in a state of collapse from loss of blood, the face and lips being pale and cold, while he also had tinnitus aurium and dimmed vision. In spite of treatment by hypodermic injections of whisky, strychnia, and saline solution, the patient continued to lose blood and gradually became weaker, finally succumbing seventy-six hours after the extraction of the tooth. There was no trace of any similar condition to be discovered among the patient's relations. On the maternal side there was a phthisical taint, and on the father's a neurotic tendency.