

have examined reports, no deaths could be attributed to the cocaine, although in one or two there were alarming symptoms.

Goldan, of New York, reports the following case (*Phil. Med. Journal*, November 3, 1900), Mrs. L., in labour. Normal presentation. Analgesia to buttocks shortly after puncture. There soon followed vomiting, retching, profuse perspiration, dry mouth and muscular tremors. Pulse rose to 140, respirations to 60. She had every symptom of shock for about 10 minutes. After the placenta was delivered she went into collapse, was blanched and pulse imperceptible. She was inverted, and a hot saline enema given, after which she gradually improved. For two days she had severe headache, which was not relieved by medication.

Hopkins, of Brooklyn, reports another case (*Phil. Med. Journal*, November 3, 1900) in which there was no analgesia produced by the cocaine, and ether was administered, but had to be stopped owing to the condition of the patient. Pulse, 160, respiration feeble, pupils dilated, tremulousness of body and vomiting. At times the heart almost stopped. Three pints of saline solution were injected into the brachial vein, and two pints into the rectum. Strychnine and nitroglycerine were given hypodermically. It took six hours work to bring the patient around, and for ten days she had frequent sinking spells with general depression.

Carrière and Vanverts report a case in which no analgesia was produced, but toxic symptoms with violent headache, vertigo and vomiting came on, gradually disappearing in ten days (*L'Echo Med. du Nord*, May 19, 1901) W. G. Macdonald, of Albany, N.Y., gives the following report (*Med. Rec.*, December 1, 1900.) Patient a hard drinker. Under cocaine became cyanotic, profuse cold perspiration, respiration 60 to 80, pupils dilated, no pulse at wrist, involuntary evacuations. Recovery after two hours. One out of the first 125 cases reported by Tuffier, died with symptoms of asphyxia.

Racoviceanu-Pitesci, of Bucharest, says that three of his cases, out of 125, showed signs of intoxication that endangered life, and that necessitated artificial respiration and subcutaneous injections of ether, and that he knows of two deaths in Roumania following the lumbar injection of cocaine (*La Semaine Médicale*, August 8, 1900.)

It is well known that some people have an idiosyncrasy for cocaine, and it is impossible to tell who those people are before using it, so that what is a sufficient dose to produce a safe analgesia in one person is enough to endanger another's life. Many dangerous symptoms, and some deaths have occurred from the subcutaneous injection of cocaine. Another fact to remember is that when once the cocaine is