

M. Maas, of Fribourg, has made a series of researches on the absorbing power of wounds, and the results which he has arrived at are partly opposed to the opinion admitted up to the present. A wound cauterized with the hot iron, nitrate of silver or nitric acid, absorbs like an intact wound: the absorption is much more rapid if the wound has been in contact with carbolic acid, as in Lister's dressing; it is nil in cases of cauterization with chlorate of zinc. In wounds treated openly, a crust is formed which at the end of six hours is impermeable: it becomes so only at the end of three days if the wound has previously been covered over with a wet dressing.—*Le Prog. Med.*

SIGNS OF DEATH BY DROWNING.—MM. Bergeron and Montano (*Annal. d' Hygiene*,) have arrived at the following conclusions on the subject of death by drowning: 1. The presence of frothy foam, not only in the pharynx and the larynx, but also in the bronchi, is the constant sign of death by submersion, whether syncope or asphyxia predominated in the mode of death, and whether the individual was free in his movements or was thrown into the water after having been made insensible by opium or chloroform, or was partly suffocated, or was fettered in his action. This absolute constancy of the presence of foam, whatever the special condition in which the submersion occurred, is, in the opinion of the authors, the single sure uniform sign proving death by drowning. 2. There is always a certain degree of congestion, and sometimes subpleural ecchymoses are seen; but these ecchymoses, which give the lungs a spotted or speckled look, are unlike the punctate ecchymoses of suffocation. 3. The intensity of the hyperæmia, and the extent of the ecchymoses, are always in proportion to the efforts of the animal while struggling against submersion. It is the same also with the human subject, as has been verified in all necropsies made by the authors at the morgue in Paris during the last ten years. This fact permits one at a necropsy to learn concerning what passed in the last moments of life, to know whether or not the individual struggled long and vigorously during the act of drowning.—*British Medical Journal.*

CHLORATE OF POTASH IN THE HÆMORRHAGIC DIATHESIS—By A. Harkin, M.D., Belfast.—Chlorate of potash, which is prescribed by the profession for a variety of diseases—such as scarlatina, throat-affections, low fevers, blood-poisoning, etc.—has qualities deserving a much wider application; and will yet, in the opinion of the writer, founded on extensive experience, be recognised as a potent remedy in the treatment of maladies depending on suboxidation, on defective nutrition, secretion, excretion, aeration, and molecular metamorphosis. Being mainly composed of oxygen and potassium, each of which is essential to the genesis of healthy blood, its chemical properties commend it to our consideration. In the hæmorrhagic diathesis, which is characterised by a diminished proportion of fibrin, a soft clot, an absence of the buffy coat, accompanied with a delicacy of structure in the capillaries and minute vessels, a remedy is required that shall increase the fibrin, add to the plasticity and chemico-vital elements of the blood and restore its coagulating power, as well as the contractile action of the capillaries; and thus destroy the dyscrasies, in which a slight wound may lead to excessive hæmorrhage, a trifling contusion to extensive extravasation. That this salt, whether given alone or in combination with iron, possesses the very desirable property of controlling the various developments of the hæmorrhagic diathesis, and that its persevering administration will neutralise the constitutional taint on which these ailments depend, Dr. Harkin hoped to establish by the relation of satisfactory cases, selected from an experience of its value extending over more than twenty years' observation. He generally ordered the medicine in the form one ounce of a saturated solution three times daily—one ounce of the salt to a pint of water; and, if iron be required, an addition of one drachm of the muriatic tincture to the solution completes the mixture. Administered in this proportion, Dr. Harkin had had the greatest satisfaction in the treatment of epistaxis; in hæmophilia; in hæmorrhage from the bowels, from the kidneys, from the lungs, from the stomach; in menorrhagia; in scurvy; and in purpura hæmorrhagica.—*British Medical Journal.*