

my well-to-do cases. In my charity cases I frequently omit this element, because of the expense, and I must confess that these do about as well as my well-to-do cases, sometimes better. I seldom find it necessary to confine the patient to bed. I do not use a splint by day, and weight and pulley by night. The splint is used night and day. I aim to keep the protection continuous. The perineal straps that pass from the pelvic band of the splint, serve as perineal crutches. The constitutional treatment employed is cod liver oil, hypophosphates, iron in its various preparations, according to the needs of the patient. The digestive functions must be good. When these fail, remedies to correct. In other words I aim to keep my patient's health above par, and great importance is attached to climatic influence. It is just as important to have a patient with hip disease in a climate where bacilli are in high dilution, as it is to have a phthisical patient in this altitude. With such advantages, then, the prognosis ought to be good. We can control a tuberculous epiphysis better than we can a tuberculous lung. By means of axillary and peroneal crutches the patients can live in the open air.

I thank the gentlemen of the Association for the audience they have given me, and I trust that I have made myself well understood.

PERMANGANATE OF POTASSIUM; ITS ACTION AND USES.

BY J. H. M'CASEY, M.D.

There appears to be a great diversity of opinion regarding the therapeutic value of permanganate of potassium. In my hands this drug has proved both valuable and reliable. Lacerda was the first to show that, when brought in contact with snake poison, it readily and effectually destroyed its toxic power, but when given by the mouth it had no effect on such poison. On coming in contact with organic matter, it quickly decomposes, and its power is lost. When put up in solution, pure water should be used, and no other drug should be combined with it. Fresh solution should be made every three to six days.

When taken into the stomach in concentrated solution, it produces heart-burning and vomit-

ing. But when taken in doses of gr. 1 to 2, diluted with half a glass of water, no irritation or inconvenience is experienced in the great majority of cases. Permanganate of potassium is contra-indicated in acute inflammation of the stomach, but may be used in chronic gastritis, accompanied by fermentative changes in the food. Dose, gr. 1 in pill three to four times a day after meals. Here it heals the mucous membrane, prevents fermentation, and relieves insufficient oxidation of the food, as shown by decrease of uric acid in the urine. It is stated on high authority that it favorably influences the glycogenic function of the liver, and promotes oxidation in the tissues, and therefore should be a valuable agent in the treatment of diabetes mellitus.

As originally suggested by Sydney Ringer, its chief internal use is in the treatment of amenorrhea.

In sudden cessation of the menses, whether due to cold, anæmia, grief, or deficient activity of the menstrual apparatus, it will restore the flow with great precision. It is contra-indicated, however, in congestive and asthenic amenorrhea. When the menses cease on slight cause, it indicates a debilitated condition of the organs, and the drug should be taken in moderation for some time. I have found this drug beneficial in cases where the periods were regular in point of time, but the flow was either too great or too small. In anæmic or chlorotic females, it is well to administer tonics such as iron, arsenic, phosphorus barks, etc., for several months. Iodide of iron is especially valuable where a strumous diathesis is present. Mode of administration: Take one grain in pill every four to five hours with half a glass of water after each dose. A sitz bath—a vaginal douche, as well as a warm enema once or twice a day for a few days, once in three or four weeks, have proved valuable aids in the treatment of amenorrhœa.

It is important to begin the treatment, if possible, three or four days before the expected sickness.

Mrs. L., æt. 23 years, first menstruated at the age of 15 years; being fearful of her mother's wrath, removed and washed the stained linen. She redressed with the same cold and wet clothing. The catamenia did not reappear for about three years after this. The lady married,