SOME SOURCES OF ERROR IN SOUND-ING FOR STONE.

Mr. Buckston Browne (Harveian Society of London) said his first proposition was, that in cases where the prostate was enlarged, stones are often missed when the bladder is examined, because the sound has not reached the bladder. but is arrested in the prostatic urethra. He this by several examples, and illustrated expressed an opinion that in many cases where the bladder was found contracted and the sound could not be turned, the real truth was that the sound had never entered the bladder. proved that many stones were missed because the post-prostatic pouch is not explored, or not fully explored. It was shown that in certain cases it was very difficult to explore this pouch by means of instruments passed in by the urethra, and that in certain other cases it was impossible to do so, and that in these rare cases, the only way to thoroughly search was by means of supra-pubic incision into the bladder. Several interesting and important cases from the author's personal experience were cited in illustration. The sound described was of solid burnished steel, with a round smooth handle, a shaft ten inches long and equal to No. 7 of the English scale, ending in a smooth broad flat beak, exactly like the end of a broad flat-bladed lithotrite. The author asserted that the beak of this instrument allowed it to ride easily over the bar at the neck of the bladder, and that it was not caught in one or other prostatic sinus as the end of the ordinary sound was so prone to be, and that when in the bladder it slipped more easely than an ordinary sound under a projecting prostatic middle lobe, and so enabled the surgeon to thoroughly search that favorite habitat of a stone—the post-prostatic pouch.— Med. Press and Circular.

THIOL IN SKIN DISEASES.

In the treatment of eczema, pemphigus, seborrhea, acne, dermatitis herpetiformis, and possibly other forms of cutaneous disease, the new drug thiol (if present results are borne out by subsequent trial) will be found valuable. While it is found in commerce in both powder and liquid form, the powder is preferable; it is best used with bismuth subnitrate or starch, or preferably thus:—

Thiol, 3j. Oxide of zinc 3ss.—M.

It is also readily soluble in water, and may thus be applied in all diseases where it is advisable. Its composition is almost identical with that of ichthyol, but it has none of the objectionable features of the latter drug.—Lanphear's Medical Index.—Hosp. Gaz.

LOCAL TREATMENT OF DIPHTHERIA

Diphtheria at the present time seems to be rather active in many districts, and I therefore think it a good opportunity to lay before you the claim of the sulphur treatment, which by many has come into a certain amount of disrepute. I used the sublimated sulphur, and by three methods; to the third, however, I am inclined to give by far the greatest credit.

i. By means of a tube blow a portion, say half a drachm, of sulphur over as much as can be covered of the diphtheritic membrane,

 Gargle with a solution of the sublimed sulphur, or if preferred, with sulphurous acid mixture.

iii. By the inhalation of the fumes of burning sulphur. I recommend that the first means should be used twice a day, night and morning, and that the two latter ones every two

hours.

Now I claim for the latter that no fungus can possibly exist under the fumes of burning sulphur, and that its action is to completely shrivel up the diphtheritic membrane, putting to death the micrococci as fast as they are formed, the membrane eventually pealing off, leaving a healthy healing surface.

I trust these remarks may be of service to some of your readers in causing them to persevere with the sulphur treatment, which I am afraid, in many cases, when tried is discarded too soon. So far, I myself am quite satisfied with its results.—Dr. Alfred Stanley (Birmingham) in the British Medical Journal,, Dec. 14th 1889.

THE TREATMENT OF LUPUS BY THE APPLICATION OF ICE.

Dr. Klaus Haussen, in the Centralblatt für Chirurgie, for September 7th, reports two cases of lupus, one of the lower lip and the other of the chin, both of which had been subjected to various modes of treatment, such as cauterization, the use of the gilvano-cautery, scraping, etc. In spite of this treatment healing did not occur, and the disease continued to spread. In both cases the parts affected were most sensitive, and even the application of iodoform powder caused long-continued pain, which the use of cocaine solution was unable to mitigate. Haussen scraped the parts again, and treated the disease by applications of ice. The extreme sensitiveness speedily disappeared, and in the course of a few weeks' both cases were entirely cured.—Med. News.

TREATMENT OF CANCROID TUMORS.

Salicylic acid, zj; alcohol, zj ether, zij; elastic collodion, zj. Paint over the excrescences once every three or four days by means of a brush.