

with the Dominion Government to secure an annual grant for the maintenance of a *National Vaccine Establishment*, where a good supply of animals can always be kept under conditions favorable to the propagation and perpetuation of the stock of lymph.

Such an establishment is an imperative necessity in this country, in the interests of the profession and the public.

Progress of Medical Science.

AN OPINION AS TO QUININE IN PNEUMONIA.

A writer in the St. Louis *Clinical Record* says: "I think a good many pneumonic patients are killed with quinine. If there is any indication or reason for giving it, I don't know what it is. It disorders the nervous system, impairs digestion. It has no influence in preventing hepatisation or hastening resolution. I know a man in my country who has complete amaurosis from taking quinine for pneumonia last winter. His doctor gave him half a bottle in twenty-four hours on the 'vasomotor,' 'inhibitory,' 'accelerating,' 'depressing,' 'constricting,' 'dilating,' hypothetical theory of the day. But the fashion now is quinine, from a stone-bruise to a broken neck. If no more quinine should be used than is really beneficial in disease it wouldn't be worth a dollar a bottle."—*Pacific Med. and Surg. Journal*.

BENZOATE OF SODA IN WHOOPING-COUGH.

D. Tordeus, of Brussels, writes that he has prescribed the benzoate of soda in a number of cases of whooping-cough, and that in all the cases the parents reported that the coughing fits began to diminish in force and frequency after one or two days of treatment. He gives four grains of the salt every hour to a child of two or three years. The drug seems not alone to diminish the force and frequency of the paroxysms, but also to exert a favorable influence on the mucous membrane of the respiratory tract, and to prevent the development of serious pulmonary complications.—*Journal de méd., etc., de Bruxelles*.

TREATMENT OF LEUCORRHOEA IN CHILDREN.

Leucorrhœa in children, says M. Bouchut (*Practitioner; from Le Praticien*), is caused by

vulvitis, not vaginitis or metritis. He therefore treats this condition by extreme cleanliness, repeated bathing with bran-water and lead-water, lotions of corrosive sublimate (two grains to ten ounces of water), carbolic acid (two grains to the ounce), and occasionally solution of nitrate of silver (three grains to the ounce). In the intervals of applying the lotions a pledget of lint saturated with coal-tar or an ointment of red precipitate may be placed between the labia. Such a pledget kept in place by a pad protects the surrounding parts as well as the labia themselves from the irritating secretion, which is often present in considerable quantities. For the general treatment M. Bouchut recommends the administration of cod-liver oil and quinine to strumous patients, and of arsenic to those with eczematous eruptions.

FOR FRESH COLD IN THE HEAD.

Dr. T. F. Houston writes: For fresh cold in the head, accompanied with obstruction in the nasal passages,

R. Carbolic acid..... 3 i
Absolute alcohol..... 3 ij
Caustic solution of ammonia 3 i
Distilled water..... 3 iij

M. Make a cone of writing paper; put a small piece of cotton in it; drop on the cotton ten drops of the mixture, and inhale until all is evaporated. Repeat this every two hours until relieved.—*So. Med. Record*.

MANAGEMENT OF THE THIRD STAGE OF LABOR.

Dr. Max Runge, in a communication to the Obstetrical Society of Berlin, criticizes the current teaching regarding the management of the third stage of labor. He takes as the special text of his animadversions the directions given by Fritsch, which are to the effect that *immediately* after the birth of the child the uterus is to be seized by the hand on the abdomen, and the placenta pressed out. Dr. Runge states that for a long time he faithfully carried out this method; and so did others in Prof. Gusserow's clinique. The objection to it is, that the squeezing out of the placenta is begun before that organ has become completely separated; consequently, when the placenta has been expelled, often a lit of the membranes may yet be attached to the uterus and be left behind after the placenta has been taken away. While this teaching was carried out it was quite a common thing for a pair of forceps to be needed to remove these retained pieces of membrane, and secondary post-partum hemorrhage became extraordinarily frequent. He refers to a former