

intelligent member of the College, who is alive to the possibilities of the future, will be found stultifying himself and gagging the electorate by attaching his signature to any such petition. The Council is, at present, completely in the hands of interests hostile to the profession, and there it must remain, at least, until after the next territorial elections. And to place any such reserve power in its hands would be to supply it with a wet blanket to be used, on occasion, at the instance of the schools, to stifle the just and reasonable aspirations of the electorate. The Council shows no disposition to retrench. On the contrary its policy of expansion is only limited by its power to squeeze contributions out of members of the College. It needs no Solon to foresee that it is only a question of time when it will find its monetary appetite so developed that it will have to approach the Legislature asking for power to increase the annual fee to \$5.00, or to \$10.00, or to \$20.00. Were this petition universally or even generally signed it would, without doubt, be effectually paraded on such occasions, as a charter of the profession's unlimited and child-like confidence in its wisdom and faithfulness. *Cave canem.*

Yours, etc.,

Port Perry, Dec. 12th, 1896.

JOHN H. SANGSTER.

The Treatment of Tic Douloureux.

To the Editor of the CANADIAN MEDICAL REVIEW.

SIR,—In yours of September is recorded Dr. Dana's treatment of Tic Douloureux, p. 84. Now, if the doctor confines himself to a recommendation for the cure of this disease only, which is situate in the three branches of the fifth nerve, it is not so much open to objection as if he were speaking of neuralgias generally, but even here I must join issue with him in the treatment he recommends for a diseased condition of the trifacial, for I have found that each branch requires a different treatment. These, as you know, are nerves of sensation only. When the supraorbital nerve issues through the superciliary foramen it is much exposed to injury and to the effect of the cold weather and from no other distant cause, a liniment of aconite and chloroform rubbed gently in will afford instant relief, followed by a few repeated doses of Dover's powder.

The infraorbital, most often affected and covered more closely by integument, is best treated by gelseminum and an ointment made of morphine and lanoline combined with a little camphor, but both are benefited by warmth and the application of *veratrine* externally.