

to state that the syphilis reaction occurs in scarlatina, since it has been shown that the substance giving rise to complement deflection in scarlatinal serum is not identical with that giving rise to the reaction in syphilitic serum. They therefore claim that the clinical value of the syphilis reaction is not lessened by the find that scarlatinal serums may react positively with one antigen but not with others. Much himself has more recently admitted that this is so.—*British Medical Journal*.

General Anesthesia per Rectum.

I have witnessed this method of narcosis by my colleagues in Boston and New York, at meetings of the Clinical Society of Surgery. There is very little recent literature on this subject. The first foreign reference that I have seen is reviewed in the *Centralblatt f. Chirurgie*, 1907, Vol. XXXIV., p. 152. The contribution is by Vidal, a French surgeon. The principles of the method are as follows: The alimentary tract must be cleaned first by a cathartic and then by an enema of 2 litres of fluid containing 2 gm. (gr. 30) of carbonate of soda. The latter is employed to clear the mucous membrane of fat. Half an hour before the anesthesia morphine is given hypodermically, the patient is placed in the middle Trendelenburg position, and a rectal tube introduced. The ether, forced by bellows into the tube, should pass through an empty flask which rests in a hot-water bath at 39 deg. C., so that the ether vapor is warm. According to Vidal this method is indicated when respiratory complications are threatened. I mention this method because, perhaps, in the development of surgery of the chest it may find larger application, and the mouth can be used entirely for the maintenance of overpressure in the lungs.

That the extreme cyanosis is not necessarily due to any obstruction in the respiratory tract, but to an overdose of the anesthetic, was demonstrated in one of the cases I witnessed. The complication appeared as critical as any I have ever observed in narcosis by ether in the ordinary method. In many operations upon the head and neck it would be very convenient to get rid of the anesthetic paraphernalia in that region, but up to the present time the technique and art of rectal anesthesia have not been sufficiently developed to justify substitution.—*Progressive Medicine*, Dec., 1908.