so often accompany it. The uterine contractions are not suppressed but regularized, occur at more regular intervals, and become effica-The influence, indeed, exerted on the progress of the labor is favorable. It usually proceeds rapidly, and sometimes this rapidity is truly surprising. Not only is this anæsthesia without danger, but even without any inconveniences. The labor, in spite of what has been said, is not delayed, and the child, at its birth, exhibits no signs of insensibility. quences of delivery are better, and the strength is more rapidly recovered. An important fact to be insisted upon is that, if we desire to keep within the limits of small doses, the inhalations must be commenced before the woman has suffered much. As to contraindications of his procedure, M. Lucas believes they must be excessively rare; and he does not consider as such either cardiac or pulmonary affections.

TREATMENT OF AMENORRHOEA.

The Practitioner says that Professor Courty, of Paris, employs a pill composed of powdered rue, savin, and ergot, of each five centigrammes (2-3 gr.) and aloes from 2-5 centigrammes. Of these thirty are ordered, and three are taken the first day, six the second day, and nine the third day, always in three doses. They are suited for cases of idiopathic amenorrhea, without great reaction on the economy, and when there is reason to suppose that the suppression of the menses is due either to an insufficient determination toward the genital organs or to a difficulty of discharge, due to inertia of the In order to encourage the fluxion toward the genital organs, Dr. Courty orders, before beginning the pills, foot baths, sitz baths, and fumigations. He also applies leeches to the labia during the three days the pills are being taken. The pills generally induce colicky pains and often a little diarrhea.

TREATMENT OF PUERPERAL FEVER.

In cases of puerperal fever, Dr. Jas. Glover gives the following mixture every three or four hours.

в.	Quiniæ sulph	grs. ii.
	Tr. ferri chlor	Mx.
	Spti. chloroformi	Mx.
	Syrup simp	3 88.
	Aquæ destil	Σ i.
	M.	J

He also gives a pill containing half a grain of opium, every three, four, six, or eight hours, and applies a large poultice sprinkled with laudanum over the abdomen. This is renewed every three or four hours. He orders the

vagina to be syringed out, at least twice a day, with warm water, containing a little Condy's fluid. He rejects ipecac on account of its nauseating properties, and calomel on account of the intestinal irritation it produces. For diet he gives beef-tea or chicken soup, brandy and arrow-root.—The Lancet.

JOHNSON'S FLUID BEEF.

Soon after receiving a sample of this fluid' beef we had a good opportunity of putting its: value to the test of actual experience. We had under our care several children who were suffering from very severe attacks of whoopingcough, and whose appetites were so bad, and digestion so weak, that it was difficult to get them to take sufficient amount of nourishment. In the meantime a tin of Johnson's Fluid Beef having been sent to us, we were induced to give it to our little patients, and we must confess. that the trial was a very satisfactory one. It. was given sometimes in the form of soup, sometimes spread on bread-and-butter; but in whichever way it was given it was taken when other kinds of food were refused; it was well borne by the stomach, and appeared to furnish somuch nourishment that there can be little doubt it contains a large quantity of the most nutritious elements of food.—Dublin Medical Press. and Circular.

THE RELATION OF ALBUMINURIA DURING PREG-NANCY TO PUERPERAL CONVULSIONS.

In a discussion at the New York Obstetrical Society, Dr. Noeggerath said that at a previous meeting it had been stated that thirty per cent. of pregnant women had albuminuria. He thought. the proportion was not greater than thirteen or fourteen per cent. It had been further stated that it was safe to treat cases of albuminuria, during pregnancy, by saline diuretics. He had often seen such cases too late. Under certain circumstances, if albumen was present, it was proper to induce labor as rapidly as possible. It was neither the amount. of albumen nor of other constituents of the urine which indicated the immediate danger of convulsions. He considered two conditions ominous: I. Albuminuria co-existing with anæmia, or hydræmia. Albuminuria co-existing with some nervous disturbance, as severe headache, or dimness of sight. Another dangerous class was that in which albuminuria occurred in very plethoric subjects, where the pulse was very full and hard. If, however, a patient in ordinary health was found to have a slight amount. of albumen in the urine, there was no objection to waiting until remedies had been tried. There was only one reliable remedy-Tarnier's treatment by skimmed milk. He had seen albumen diminish considerably within three days, under its use.