cyanic acid poisoning. It is to be given both by the mouth and hypodermically until all symptoms subside, and the odour of the acid can no longer be recognized in the exhalations.

—Thiol is recommended as a substitute for ichthyol in the treatment of skin diseases, because it is clean and never irritates, while ichthyol is impure and often irritates; ichthyol smells disagreeably, thiol does not; ichthyol spots the linen, thiol does not; moreover, its cost is about half that of ichthyol.—*American Druggist*, April 15, 1892.

MONOBROMIDE OF CAMPHOR FOR SPERMATORRHŒA.—The *Medical Summary* says: The monobromide of camphor has been successfully used in the treatment of spermatorrhœa, where a host of the usual remedies had been admininistered with no satisfactory results; finally the monobromide of camphor was given with prompt effect and perfect cures.

INCRUSTATIONS ON PERMANENT CATHETERS AND HOW TO DISSOLVE THEM.—Drs. De Pezzer and Sonnerat (*Le Bulletin Médical*, No. 7, 1892) find the deposits which incrust upon permanent catheters may be divided into two classes: whitish incrustations, consisting of phosphates of lime or ammonia and magnesia, which also contain a certain quantity of organic elements; and yellowish deposits, soluble in alkaline solutions, and which consist of the urate of soda, free uric acid, and sometimes a little of the oxalate of lime. The yellowish deposits are easily dissolved by a dilute alkaline solution—carbonate of lithia, bicarbonate of soda, Vichy water, etc.; the whitish are removed by a dilute solution of some acid—carbonic acid, phosphoric acid, lactic acid, etc. Hence when a catheter is to remain for some time in a patient's bladder his urine should be examined and injections of these solvents made into the bladder now and then to dissolve the deposits upon the catheter.—*Lancet-Clinic.*