

urethritis, so that after this was cured, any remaining anterior urethritis could be easily removed by ordinary urethral injections. These observations are founded on thirty-two cases. Urotropin also acts well in tuberculous and typhoid cystitis. In the cystitis of the enlarged prostate it lessens the need for vesical irrigation, so that, for instance, in a case where formerly they had been constantly employed, after urotropin they could be omitted for from two to three months. The writer thinks these observations show that urotropin is one of the few of the newer drugs which will retain a permanent place in therapeutics.—*Brit. Med. Jour.*, Sept. 2nd, 1899.

High Altitude and Heart Disease.

Robert H. Babcock (*Med. News*, July 15th, 1899): The conclusions reached regarding the effect of high altitude on heart disease are :

1. All forms of cardiac disease do not contra-indicate sojourn at a high altitude.
2. The ill-effects of low atmospheric pressure in some forms of cardiac disease are explicable on the hypothesis of acceleration of venous flow and corresponding quickening of the heart-beats.
3. Consequently those forms with which high altitude is likely to prove incompatible are pronounced aortic or mitral stenosis, and regurgitant disease complicated by pleural and pericardial adhesions.
4. On the other hand, patients with uncomplicated regurgitant lesions or arteriosclerosis, with or without myocardial changes, may endure low atmospheric pressure without injury.

Paralysis Agitans.

R. T. Williamson (*Med. and Surg. Review of Reviews*, June, 1899): In paralysis agitans, sulphonal or whisky and water, at bed-time, afford a good night's rest. One should also see that the bed is not too soft. Alcohol taken during the day as well as strong tea and coffee increase the tremblings. The patient's living-room should be well ventilated and not too warm. Systematic open-air treatment is valuable, carriage drives are very advantageous, and railway journeys are often beneficial. Although morphine hypodermically gives relief, it is objectionable, as the disease is so chronic. Hyoscine is the only drug which has been personally found useful. One-fourth grain should be prescribed in 6 ounces of chloroform-water, 2 teaspoonfuls of this being given; thus each dose corresponds to $\frac{1}{16}$ grain of hyoscine hydrobromate. The dose may be increased to $\frac{1}{8}$ grain. After some weeks the drug loses its good effect, when it is best to stop it for a time; the good results are again obtained by recommencing.