

scopic examination showed the bulbar urethra for nearly two inches to be lined with large, flabby, and tender granulations. Bonjean's ergotine was applied pure, by means of an ointment syringe, after evacuation of the bladder and thorough irrigation of the canal by warm water. Six applications on alternate days effected a cure, the gleet entirely disappearing, and no trace of granulation being visible by the endoscope. The second case had a history of two years' severe and constant muco-purulent discharge following gonorrhœa, with occasional slight hemorrhages; patches of granulation were distributed throughout the whole spongy urethra. Daily applications were made for a fortnight before the discharge ceased, and ten more days were required to remove the granulations. A useful instrument for the local application of the ergotine may be extemporized, by mounting upon a small, flexible bougie, a foot of circular, closely woven, hollow lamp-wick, of a diameter equal to a number 12 English bougie. The small bougie is passed into the centre of the wick, the lower end of the latter having been securely tied. The patient should smear this swab thoroughly with ergotine, rubbing it well into the fibre; then, after urination, and irrigation of the urethra, pass the instrument to the needful depth, there to be retained for half an hour. Ergotine, diluted with glycerine, was applied by means of a camel's hair brush, to an old case of otitis media, with encouraging results.—*New York Medical Journal*, October, 1879.

LIPOMATOUS DIATHESIS.

D. Pedro Angel Osuna narrates in *La Andaluía Médica* a case of what Follin called the lipomatous diathesis. It occurred in a woman fifty years of age, of good constitution, and without morbid antecedents, who had twenty-two lipomata on the left arm, nineteen on the right, seventeen on the left thigh, thirty-five on the right, and two on the belly. Among these 95 lipomata, the sizes varied from that of a walnut, the smallest, up to that of a fetal head, the largest. Senor Osuna, not having found in the authorities any satisfactory explanation of

cases analogous to the present one, and relying upon a physiological study of the combustion of fat in the organism, supposes that, given a faulty relation between growth and waste, a want of oxygen for oxidation purposes, or a diminution of alkaline carbonates in the blood plasma, fat will accumulate in certain situations affecting the form of tumour. This explanation is not accepted for the solitary lipomata which follow contusions, and which he believes to be formed at the expense of a fatty transformation of the red globules of the blood driven from the vessels by the traumatism, and which serves as a nucleus for the formation of the lipoma. Resting on these pathological considerations, he enunciates a treatment of lipoma which consists in subcutaneous sections and massage (kneading) of the tumour, proposed by Bonnet (of Lyons), accompanied by injections of pancreatic juice, which by its emulsionizing action favours the resorption of the fat of the neoplasm.—*Rev. de Med. y Cirugía Pract.*, Madrid.

FALL OF SEVENTY FEET.—RECOVERY.—Dr. Stephen Kartulis, House Surgeon to the Greek Hospital in Alexandria, reports in the *London Lancet* for 27th March, the case of a boy seven years old, who fell from the top of one of the highest houses in Alexandria, a distance of 71 feet 3 inches, and sustained a compound fracture of both bones of the leg, and a fracture of the femur. The boy retained consciousness, but delirium and convulsions occurred in the subsequent history of the case. He ultimately made a good recovery, with half an inch shortening of the leg.

In the *British Medical Journal* for 27th March, Mr. Pugin Thornton recommends the use of the following solution in the treatment of Ozæna:

R. Sodæ Carbonatis.
Sodæ Biboratis āā.....3ij.
Liq. Sodæ Chlorinatæ.....3ss-3ij.
Glycerini.....3i.
Aq: ad3vi.

It is applied cold by means of a hand-ball spray apparatus.