cases of rigidity of joints frequently following a prolonged use of stiff dressings, and requiring the treatment by "articular gymnastics." The latter not uncommonly proves to be impracticable on account of severe pain, caused by any exercise of the kind. Injections of cocaine, however, can make the procedure quite painless, the patient readily beginning to train his pseudoankylosed joint in due manner. As far as the author's experience goes, the cocaine anæsthesia, whether simple or mixed, seems to be free from any serious concomitant or consecutive effects. True, in women there may now and then occur some nervous symptoms, but, as the author is inclined to believe, they should be attributed rather to some emotional causes than to the agency of the drug used.

In the course of a prolonged discussion, following Dr. Zmigrodski's communication, Dr. A. A. Troianoff, house surgeon to the Obükhovskaia Bolnitza, has said that he found a local cocainisation ($\frac{4}{5}$ grain of the alkaloid) useful only in cutaneous operations, while in those on deeper seated tissues it failed to secure a sufficient anæsthesia.

Dr. O. A. Schlesinger has stated that he has obtained excellent pain-killing results in cases of labor in primiparæ, during the "crowning" expelling pains. He injects a syringeful of a five per cent. solution of cocaine into the labia, and, besides, paints the uterine os and cervix with the same fluid. The anæsthetic effects last from 15 to 20 minutes.

Professor M. S. Sübbotin, of Kharkov, has said that he resorts only to a local cocainisation in suitable cases, a "mixed narcosis" having failed in his hands.

Dr. A. L. Ebermann has stated that he employs cocaine in operations on the urethra and bladder. Amongst other things, he has pointed to the curious fact that, while inducing a complete anæsthesia of the canal and vesical cavity, cocaine always fails to produce any anæsthetic impression on the neck of the bladder.

Dr. A. P. Zelenkoff has concurred with Dr. Zmigrodski in recognizing the value of cocaine as a "mobilising agent."—*Medical Chronicle*.

TREATMENT OF SEVERE VOMITING OF PREG-NANCY.—Dr. Amand Routh read a paper on this subject at a recent meeting of the Harveian

After alluding to the difference be-Society. tween the vomiting of pregnancy and the vomiting in pregnancy, he noted the anxiety occasioned by severe forms of this condition, and the advantage of having an easy and efficacious mode of treatment in itself free from risk. Although it was now generally held to be reflex, and due to some local irritation at or near the os uteri internum, great difference of opinion existed as to the exact pathology and as to how it was produced. The author did not think the vomiting was often secondary to displacement or incarceration, and showed that it occurred where no malposition existed, and that, even when vomiting occurred with misplacement, replacement did not cure it. The treatment by drugs, accessory measures, replacement, Copeman's dilatation, local applications of cocaine, counter irritation, etc., was reviewed, and it was shown by several cases that painting the cervix and the end of its canal with iodine paint (equal parts of iodine, iodide of potassium, spirits of wine, and water) had, in the author's hands, never once failed in the last seven years at once to stop the sickness, which might, however, begin to return from the fifth to the fifteenth day, when it was almost certainly permanently arrested by a second application.—British Medical Journal.

Canadian Practitioner

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TORONTO, AUGUST 1, 1891.

EXECUTIONS BY ELECTRICITY.

Since the execution of the four criminals at Sing Sing, N.Y., there has been considerable discussion in both the medical and lay journals respecting the new method. The advocates of electrocution, as it is sometimes called, appear to be well satisfied with the Sing Sing results.