

number of organisms, and in many cases their final disappearance. He also believes that the mechanical action of the paste is a prominent factor in the healing process; the diseased walls are separated and brought into contact with a substance in itself bactericidal and stimulating. This method is obviously not applicable to biliary or pancreatic fistulae or sinuses communicating with the cranial cavity or hollow viscera. There are cases in which the bismuth plug may produce unpleasant symptoms by pressure on vital organs, and, in cases where the disease has affected large veins in the neighborhood of the sinus, the entry of the bismuth into the circulation might cause serious consequences. In a few instances toxic symptoms have been observed, but up to 100 grams of the 33 per cent. paste may be injected without fear. Beck states that the formation of sinuses and fistulae may be prevented by opening cold abscesses, evacuating the contents, and at once injecting not more than 300 grains of 10 per cent. bismuth paste. The opening should not be sealed. This method is applicable to suppurative accessory sinuses of the head, while of value in all suppurating sinuses and cavities the injections are particularly effective in tuberculous cases.—*British Medical Journal*.

Surgical Hints

As recommended by Sir William Bennett, no examination of a case of pain in the groin can be effective unless it is made in the erect as well as in the horizontal position of the patient.

Internal urethrotomy should not be undertaken in the presence of acute urethral inflammation because of the risk of infection and the probability that the operation will fail to produce permanent results.

To stimulate intestinal peristalsis in cases of paresis of the bowel following abdominal operations, the use of eserine salicylate, 1-60 grain or more, is often exceedingly effective, particularly where there is increasing distension and intractable vomiting.

After performing internal urethrotomy it is advisable to pass sounds of the normal caliber of the urethra every other day until assured that healing of the wound has occurred. This is shown by the fact that the insertion of the sound is unattended with bleeding.—*International Journal of Surgery*.