

sometimes not. He states that not only was the mortality diminished under bisulphide of carbon or *B-naphthol*, but that the whole course of the disease was rendered milder, and there was a remarkable immunity from serious complications.

USE OF BORAX IN EPILEPSY.—The monthly meeting of this Society was held on Thursday, April 3rd, Dr. Edwards, president, in the chair. A paper was read by Dr. Stewart, Assistant Medical Officer at Glamorgan County Asylum, on cases illustrating the value of borax in Epilepsy. Case 1, admitted at the age of thirteen, had had epileptic seizures dating from birth, occurring in numbers varying from two to twelve per day, chiefly at night. She had been under treatment repeatedly, but had derived no benefit. Without treatment the fits during the first week were twenty-six in number, under borax they were reduced to twenty-four in the second and five in the third week. After an interval free from fits of sixteen days, four occurred on two successive nights; then after another interval of nine days a single fit took place, and since that time there had been no recurrence of fits—*i.e.*, a clear interval of over a month. Case 2 began to suffer from nocturnal epilepsy at eighteen, and came under treatment five years afterwards. This instance was complicated by serious cardiac disease, stenosis of the mitral orifice. Without treatment, the average monthly number of fits was 101, and under borax this was reduced to twenty in the first month, seven in the second, one in the third, five in the fourth, none in the fifth, and one in the sixth. Case 3 had whooping at seven, followed by left hemiplegia, imbecility, and epilepsy. The average number of fits per week when no special treatment was employed was 3.5, and bromide failed to effect any reduction, for after being under treatment for two years and a half the weekly average had risen to sixteen. Under borax the weekly average during the first month was reduced to 15.5, and during the second month to 11.5. The diminution took place chiefly in the nocturnal seizures. In Cases 4, 5 and 7, in which the fits occurred both by day and night, bromide was shown

to exercise a decided influence upon the diurnal seizures, leaving the nocturnal practically unaltered, and in these benefit was experienced from the combined use of bromide and borax, three doses of the former during the day and one single dose of the latter at bedtime. Case 6, epileptic and imbecile from birth, came under treatment at thirty-five. The fits were of the nocturnal type; were uninfluenced by bromide, and were slightly diminished by borax. Dr. Stewart concluded that borax exercises a peculiar influence over nocturnal seizures, and that it is in cases where fits are entirely of that kind that the greatest good may be expected; that bromide, on the other hand, exerts a powerful influence over diurnal seizures, and that in cases characterized both by day and night fits, a combination of these two remedies will be productive of most benefit.

PERSONAL.

Late letters received from Dr. Good, who is in England, devoting his time to his specialty of the eye and ear, say that he is receiving every kindness and assistance from the great authorities on the diseases peculiar to those organs, and from Dr. Good's acknowledged success in the past, it can now be confidently expected that Winnipeg will have an oculist and aurist that the remainder of the profession will be proud of.

Dr. J. S. Gray is also in England taking a well earned vacation after years of close attention to his practice in this city, during his absence he will spend most of his time in the hospitals in London and Vienna.

Martin, Rosser & Co. advise the following change in the market:—

Advanced—Collodion; Ether Acetic; Ether Spt. Nitrous; Potassium Chlorate; Spts. Ammonia Avoma; Sugar and Milk; Borax.

Declined—Aconitine; Cocaine Muriat; Camphor Mono Brin; Creosote German.