yet been found which is susceptible to the choleraic poison. Dr. Koch and his colleagues have experimented upon mice and monkeys, dogs and poultry but hitherto without results, although it was almost certain that some, at least, of the matter injected, was capable of setting up the disease in a human subject. Another point of interest that requires to be cleared up is the observation that in some places the epidemic dies out long before all the people have taken the infection, although infectious matter still remains scattered over the district. This is thought to indicate that conditions arise under which the infectious matter loses some of its virulence.—*Popular Sceince News*.

## A CASE OF HÆMOPTYSIS.

Dr. Ross R. BUNTING of Philadelphia sends to Science News the following note regarding an interesting case of hæmoptysis occurring in his practice :--

Hæmoptysis is not usually regarded of itselfa dangerous manifestation : it is only as a symptom of commencing phthisis that it is of serious import. In very rare instances do we find an *immediately* fatal result; yet occasionally we meet with cases in which the hemorrhage is kept up for days and weeks. I was called some time since to see a young man (aged twenty-seven) with family history of phthisis, who was bleeding profusely from the lungs. This hemorrhage was succeeded by another in twenty-four hours; and for two weeks there occurred sometimes two hemorrhages in the day, amounting in all to twenty-one distinct hemorrhages. The most approved remedies—as ergot, gallic acid diluted sulphuric acid, and tinct, digitalis-were administered without effect, the hemorrhage still continuing. It was very evident, that if the flow was not checked, judging from the patient's condition he would soon die from exhaustion. A bladder filled with ice was kept constantly applied to the upper part of the chest. One-half grain of opium and two grains of acetate of lead were given every two and three hours. These remedies were kept up one week after the cessation of the hemorrhages, which lasted fourteen days.

What I would refer to particularly in this case is the successful employment of the *old-fashioned remedies*, acetate of lead and opium. I have employed them in various other cases of internal hemorrhages, and, for steady use of days or weeks, much prefer them to ergot or gallic acid.

## TREATMENT OF WHOOPING-COUGH.

Dr. J. COOPREIDER of Taylorsville, Ind., writes us that he has used the *fluid extract of chestnut leaves* for whooping-cough, with great success. He says :--

The dose employed is from fifteen to sixty drops, according to age. If the child is large enough, I give it in hot water as an infusion, sweetened; to a small child, in simple syrup or elixir.

It not only relieves or lightens the paroxysms, but will actually cure in from four to five days.

I give four to six doses per day, according to the severity of the case.

If good fresh leaves can be procured, I make the infusion as a tea, say two drachms of the leaves to half a pint of boiling water, and give two ounces at a dose, sweetened with white sugar.

## INGROWING NAILS.

The following practical hints from the *Journal* of *Cutaneous Diseases*, on the management of ingrowing nails, are well worthy the attention of such of our readers as have to deal with these toublesome ailments :--

When the nail threatens to grow into the skin, or has already injured it, the first indication is to put on a sock of moderate size and to remain Afterward the nail is to be scraped on the quiet. affected side till it is sufficiently thin; then it is to be seized with a delicate forceps, raising it in a sense inversely to its natural curvature. This having been done, a small lamina of lead of a few millimetres' thickness is to be inserted beneath the nail, and after folding it over the toe it is to be fastened there with a strip of plaster. In this manner, the granulations being no longer in contact with the margin of the nail, the pain ceases, and the sore heals more or less rapidly; during the whole of which time the apparatus should be frequently inspected, so that the limina of lead may not become displaced. Besides this, it is necessary to scrape the nail every two or three days, so as to keep it thin and flexible until the skin returns to its natural state, and can resist the pressure of the nail, and then the lead is removed. Hebra treats ingrowing nails, in the following manner : Cut some flakes of lint of the length of the lateral groove of the nail, or a little longer. The lint is to be placed on the nail, parallel to its groove; then, with a flat probe, introduce the lint, thread by thread, between the flesh and Thus the parts are separated, with the little nail. cushion of lint lying between. The sulcus is then to be filled with pledgets of lint, and, finally, long narrow strips of adhesive plaster are to be applied, always from about the inflamed sulcus downward, in such a manner that the latter is still farther removed from the margin of the nail. With such a dressing applied with sufficient care, there is no pain whatever; and the patient can in a short time put on his ordinary stocking, and walk without trouble. After twenty-four hours the strips of adhesive plaster are to be removed, being previously softened in a bath of tepid water. This dressing is to be repeated daily ; and in from two to four weeks it will be found that the toe is entirely well.