

this is abundantly fulfilled by a combination of ipecacuan powder with sulphate of zinc. In my practice I never prescribe the tartrate of antimony alone as a vomit, especially to a child, but I find that drug useful in cases of croup in almost every stage, when given in small doses, of the wine for instance: I think its effect when thus administered, is chiefly that of soothing and calling forth a natural moisture upon the lining of the wind-pipe. Since, moreover, the antimony is not used in these advanced cases for its depressing effect, it is not inconsistent to employ it as I have described, while at the same time it may be necessary to support the patient's strength with soups or even with wine. The inhalation of a spray of warm water from Siegle's atomizer is often of essential service after lancing the oedematous aryteno-epiglottidean folds. The vapour just acts as a fomentation does to external parts, by soothing its irritability and reducing congestion.

In conclusion, I think I may re-state in brief terms the practical results which, in my opinion, flow from the preceding consideration of this subject.

1. Tracheotomy should on no account be performed during the exudative stage of croup; for it is either useless in the worst cases or positively hurtful in those where there is any hope of recovery.

2. In those cases of advanced croup in which the spasmodically constricted glottis is the cause of immediate danger, our efforts should be directed towards its relaxation, for which purpose no very satisfactory means are as yet known to us, but perhaps the best are the inhalation of chloroform and the use of Siegle's atomizer, interrupted occasionally by the employment of an emetic.

3. In those cases in which oedema of the aryteno-epiglottidean folds is the proximate cause of impending apnoea, the swellings should be reduced by the topical application of strong solutions of nitrate of silver, or by the laryngeal lancet.

4. And lastly, the expulsion of the false membrane from the wind-pipe, the performance of tracheotomy will very seldom be necessary; but if it is required from obstinate disease of the larynx, it will generally prove successful, in striking contrast to the sad results of the operation when performed while the trachea is lined with exudation.—*Glasgow Medical Journal*, Feb., 1867. p. 374.

THE INOCULATION OF TUBERCLE,

The *London Lancet* gives the following summary of the important labours of the Commission appointed by the Academy of Medicine to investigate the alleged discoveries of Villemin in this sphere: