

MSS., books, jewelry, dresses, and odds and ends of all descriptions. In one of the trunks a very peculiar harness, which puzzled the gentleman, was found. It was submitted to Dr. Thomas. Upon examination, it was found to consist of a jointed steel girdle, covered with velvet—intended to encircle the waist of the wearer—and a semicircular rod of solid steel, with two circumscribed dilata-tions, joining the circular girdle at right angles. It was evidently meant to be employed in the same way, though for a different purpose, as the female T bandage. The diamond-shaped dilata-tion, intended to fit accurately the vulvar orifice, was guarded upon both sides, on the inner edge with sharp steel teeth, pointing downward, forward, and outward. The circular ring designed for the anal orifice was provided with steel teeth in an identical manner. Armorial bearings were dis-covered upon different portions of the harness. Behind, at the point of junction of the girdle with the perineal rod, was the place for a lock, or rather seal. The diagnosis was plain. It was a *ceinture*, similar in shape and design to the girdle of *Diana de Poitiers*, which every one who visits Paris sees in the *Musée de Cluny*. The Crusaders were evidently in the habit of locking up home effects before their departure to the wars.—*Louisville Med. News*.

**CANCER OF THE CERVIX UTERI.**—Dr. Goodell gives the following method of treatment in the *Med. and Surgical Reporter*—“Having torn away all I can with my fingers, I inject pure vinegar, and now resort to the serrated currettes. With these the parts are thoroughly scraped, and with the gouge-forceps the vaginal portion of the cervix is removed. Next, with the platinum buttons of the thermo-cautery, I char the whole funnel-shaped wound. \* \* \* The operation is now ended, and as there is no hemorrhage, I shall not tampon the vagina. But supposing you operate in the country at a distance from home, and you wish to guard against hemorrhage, or to stop an oozing, what do you do? You take a sponge and pass a string through the centre and tie the two free ends together in a long loop. Do not tie your string around your sponge, for you will then deprive it of its elasticity and the power of expanding. Prepare three sponges in this way, and soak them in vinegar. Pack the first sponge very firmly into the funnel-shaped wound, and make one knot in its string. The second sponge, with two knots in its string, will be pushed down to the cervix; and the third one, with three knots, will keep the other two in place. In twenty-four hours remove the sponge with three knots, and in forty-eight hours withdraw the sponge with two knots, and immediately afterwards the sponge with one knot. This last one must be removed carefully, and with a rotary motion. I do not put sponges in my patient's vagina

because she is in a hospital, in which some physi-cian is always on hand. But supposing at 3 o'clock this afternoon the nurse finds our patient bleeding, what instructions shall I give our resident? He will first inject vinegar, and if that does not stop the hemorrhage, he will then pack the womb and vagina with sponges in the way which I have just described.”

**THE MEDICINES PHYSICIANS USE.**—Squibb's *Ephemeris* gives an analysis, containing some points of interest of some observations made by Dr. Wm. P. Bolles on the prescriptions which he found on the files of three Boston pharmacists. The number counted was 3,726 which were pretty generally from physicians of that city. The number of articles entering these prescriptions was 504, the whole number contained in the U. S. P. for 1880 being 994. Of the 504, 236 occurred 5 or more times; 157, 10 times; 80, 25 times; 27, 50 times 9, 100 times; 1, 200 times. Sulphate of quinine leads the list, and is found in 292 of the 3,726 prescriptions; sulphate of morphine in 172; bromide of potassium in 171; iodide of potassium in 155; tincture of chloride of iron, 134; subnitrate of bismuth, 133; glycerine and syrup together, 120; syrup, 108; carbolic acid, 92; extract nux vomica, 87; paregoric, 80; bicarbonate of soda, 77; calomel, 72; chlorate of potassium, 71; compound tincture of gentian, 67; lime water, 65; and so on down. It will thus be seen that of the 994 articles of the *Pharmacopœia*, only 18 occur more than 65 times in 3,726 prescriptions, and of these 18 three are vehicles or adjuncts which are in such common use as to bring their numbers into prominence. Dr. Squibb regards it as surplusage of a very use-less kind to have a drug in substance, in *abstract decoction, infusion, extract, fluid extract, and tincture*. He says the individual habits of physicians are the cause of much of this surplusage. One of the remedies for this evil he points out as follows:—“The individual preferences of physicians are largely prejudices adopted from teachers in the schools, and, therefore, if the schools would but reason upon the subject, and direct only the best preparation of each drug, a needed reform in the *Pharmacopœia* would soon follow, and the phar-macists' supplies would be much fresher and more trustworthy.—*Med. Age*.”

**PLACENTA PRÆVIA.**—Prof. Parvin (*Col. & Clin. Record*) says:—While there is no single plan of treatment applicable to all cases of placenta prævia, in general, this treatment may be compre-hended in the alliterative phrase, Temporize, tampon, turn. Temporize if the hemorrhage be not so great, and the pregnancy not near its end. Tampon if the hemorrhage be severe, and the os not sufficiently dilated for immediate delivery; but let the tampon be so applied that the hemorrhage will