

interior vena cava. This case was discussed by Doctors Nevitt, Parsons, Caven and Anderson.

Dr. J. A. Kinnear presented a patient suffering from chronic gout, reading the history of the case. It was discussed by Doctors Parsons, Nevitt, Caven and Robinson.

The chairman then introduced to the meeting Dr. Wm. Honeywell, who was on the staff in the year 1877-78. Dr. Honeywell gave a brief address, contrasting conditions as he found them now in the hospital, around which he had been a good deal during the past few weeks by reason of the illness of his wife, with the conditions as they were when he was a house surgeon.

MEDICAL PREPARATIONS, ETC.

CODEINE SAFETY AGAIN DEMONSTRATED.

Dr. E. L. McKee, of Cincinnati, Ohio, speaking of Codeine, in the *Denver Medical Times*, says: "This drug, according to Butler, is one-fourth as toxic and effective as morphine. It is less depressing and more stimulant, does not constipate, cause headache or nausea, and rarely leads to the formation of a habit. Codeine seems to exert a special, selective, sedative power over the pneumogastric nerve, hence its value in irritative laryngeal, pharyngeal and phthisical coughs with scanty secretion. Like morphine, it has proved of value in checking the progress of saccharine diabetes, and it has been used for long periods without the formation of the drug habit, inasmuch as when glycosuria was brought to a termination by dietary and other measures, the cessation of the use of codeine was not followed by any special distress. The effects of codeine on the alimentary canal are remarkable, in that it assuages pain as well or better than morphine, and nevertheless does not check the secretions or peristalsis notably, unless the latter is excessive, as in dysentery. The statement that codeine is simply a 'little morphine,' only differing from the latter in the size of the dose, is an erroneous view, as can be ascertained by any one who closely observes the action of the two drugs."

Codeine in connection with antikamnia has stood the test of exhaustive experimental work, both in the laboratory and in actual practice, and they are now accepted as the safest and surest of this class of remedies. Therefore, "antikamnia and codeine tablets" afford a very desirable mode of administering these two valuable drugs. The proportions, antikamnia $4\frac{3}{4}$ grs., codeine $\frac{1}{4}$ gr., are those most frequently indicated in the various neuroses of the larynx, as well as the coughs incident to lung trouble, bronchial affecti^ons, grippal conditions and summer colds.