

circumstance that we must ascribe the astonishing success which is said to have attended the practice of Hill, of Scotland, Nooth, of England, and Flajani, of Italy.

Tenthly.—That all operators insist upon the most thorough excision possible; removing not merely the diseased mass, but also a portion of the surrounding and apparently healthy tissues, as well as all enlarged and indurated ganglions.

Eleventhly.—That the practice has always prevailed, and still obtains to save, if possible, a sufficient amount of healthy integument to cover the wound and to unite, if possible, the wound by the first intention, on the ground that these precautions will tend much to retard, if not to prevent, a recurrence of the disease.

Twelfthly.—That much stress is laid by writers upon a properly regulated diet, and attention to the bowels and secretions after operation, as means of retarding and preventing relapse.

Thirteenthly.—That there is no remedy, medicine, or method of treatment which has the power, so far as we are enabled to judge of its virtues, of preventing the reproduction of the morbid action after operation, no matter how early or how thoroughly it may be performed.

Fourteenthly.—That life has occasionally been prolonged and even saved by operation after relapse, as in some of the remarkable cases mentioned in a previous part of this report; but that, as a general rule, such a procedure is as incompetent to effect a permanent cure as a first extirpation.—*New York Medical Times.*

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*Whooping Cough and Asthma.*—Dr. Perry of Matagorda says:—"The recent epidemic of whooping cough was unusually severe, and along the Colorado very fatal. During the acute stage I did not find nitric acid beneficial; after that had passed, any alterative or nervous sedative seemed to exercise a beneficial effect.

In young children (under three years) the disease was attended with high fever, bilious vomitings, inflammation of the bowels, and spinnage-colored stools, which, if neglected or treated with mercurials, generally proved fatal in four or five days.

In such cases I found a solution of nitrate of silver, of from four to five grains to the ounce, administered in teaspoonful doses every three or four hours, to act admirably, relieving the cough, and soon changing the nature of the discharges.

I administered chloroform internally in every stage without benefit. Perhaps I was too cautious. Externally over the throat, on the spine and abdomen, it sometimes seemed to act well.

During paroxysms of asthma, I have seen no relief from nitric acid. During the interval, when there has been torpor of the liver, as is apt to follow repeated attacks of the disease, and doubtless attributable to the removal of the blood in the organ and destruction of its vessels during the paroxysms, I have thought it very useful, but not otherwise. In the internal use of chloroform, however, we have almost a specific. Administered when the paroxysm is forming, it will generally prevent its full development, and given during its height, will moderate all the urgent and distressing symptoms. I have used it ever since the discovery of the article, and have been generally successful, if not in curing, at least in palliating.—*Boston Med. and Surg. Journal.*