

differently when exposed to the same amount of the disinfectant, for the same length of time. The organisms which survive the exposure to the sublimate may experience a temporary attenuation. This attenuation, however, may be caused to disappear by successive cultivation in normal media. By the method employed in these experiments it is possible to select from a culture the most resistant forms in that culture. Many of the results of previous experimenters, who have assigned to corrosive sublimate more powerful disinfectant properties against the staphylococcus pyogenes aureus in cultures than the observations reported in this paper indicate, are attributable to the neglect of certain precautions now recognized as essential to the proper conduct of such experiments.

In the light of these experiments and those of the experimenters quoted in the paper, it is plain that for use in surgical practice the solutions of corrosive sublimate do not possess all of the advantages hitherto attributed to them.

To the employment of sublimate solutions upon wound-surfaces, it is plain that there exist at least two serious objections. First, the albumen of the tissues and fluids of the body tends to diminish the strength of, or indeed renders entirely inert, the solution employed. And second, the integrity of the tissues is materially injured by the application of solutions of this salt.

The first objection cannot be met with certainty, for the surgeon possesses no means by which he can determine the amount of albuminous material with which his solutions are to come in contact, and in any case this large amount of albuminous material is an almost insuperable obstacle to complete disinfection with sublimate. He is, therefore, never in a position to say, *a priori*, that his efforts at disinfection of the wound are or are not successful.

The second objection is equally serious. During the past two years we have had sufficient evidence to lead us to believe that the normal tissues and fluids of the body possess the power of rendering inert many kinds of organisms which may have gained access to them. This function is therefore diminished, or, indeed, may be quite destroyed, by any agent which brings about alterations in the constitution of these tissues. We know that just such changes as those to which we refer are known to follow the application of sublimate solutions. It is plain, then, if we bring about in these tissues a condition of superficial necrosis, the condition following upon the application of sublimate, they are much less able to resist the inroads of infectious organisms than they would have been had they been left in their natural condition.

As a disinfectant, in the strict sense of the word, there are, perhaps, few substances which possess the property in a higher degree than does corrosive sublimate, but at the same time

there is nothing which is employed for this purpose that requires greater care in its manipulation in order to obtain its best results than does this salt. Its action is influenced by a number of conditions which in practical application it is difficult if not quite impossible to control.

For these reasons we seem hardly justified in continuing to give to it the first place in the list of substances which may be employed practically for the purpose of rendering harmless materials containing the germs of infectious maladies. —*Sanitarian.*

THE TREATMENT OF WHOOPING COUGH.

The following treatment is used very largely by certain of the leading specialists in diseases of children in Paris, in cases of whooping cough. It is divided into three periods. The patient should remain in one room or in bed, and the physician employs belladonna and small doses of opium with aconite, as in the following prescription:—

R. Tincture of aconite,	} of each 1 drachm.
Tincture of belladonna,	
Camphorated tincture of opium,	

Two to five drops once or twice a day, according to the age of the child, is the proper dose. If there is no febrile movement the amount of the aconite can be much decreased, and if constipation is present the opium should not be used. In the second period, or when vomiting comes on, ipecac may be given in small amounts to allay gastric irritation, and in the third period when convalescence is established cod-liver oil, tonics, and Fowler's solution will be found of service.—*Col. and Clin. Record.*

For venomous bites and stings:

R. Permanganate of potash,	3j
Glycerine,	3iv M.

Sig. Apply promptly and freely to the wound.

For insomnia:

R. Chloral hydrate.	
Bromide of potash,	aa grs. x
Aqua pura,	3i M.

S. D. On going to bed.

R. Sulfonal,	grs. x—xij
Aqua menth,	
Glycerine,	aa 3ij M.

S. D. Two or three hours before sleep is desired.

R. Somnal,	3ss
Syrup of tolu,	3ij M.

S. D. On retiring. Somnal is less depressing than chloral or sulfonal.—*Kansas Med. Jour.*