

may be accompanied from time to time by accumulations of feces in the cecum and colon. These patients have occasional fever also. These combined events may give rise to considerable trouble in diagnosis. The pain and tenderness accompanying certain cases of typhoid have led to an operation for appendicitis, as have also the general pains of follicular tonsillitis. As other troubles which may cause errors in diagnosis may be mentioned abscess of the ovary, salpingitis, retained menstrual fluid, retroperitoneal abscess, and at times hypochondriasis.—*The Chicago Clinic Am. Practitioner.*

THE ABORTIVE TREATMENT OF BUBO.

H. M. Christian, in the *Therapeutic Gazette* of August 15, 1900, says that highly satisfactory results have been obtained by the abortive treatment of bubo. Successful application of the method depends upon its being instituted early, before suppuration has set in. Another condition is that it shall be due to gonorrhea, chancroid or herpes, as tubercular infiltration of the gland is not influenced by the treatment. The treatment recommended by the writer consists in the direct application of the following ointment:

R Ung. hydrarg.....
 Ung. belladonnæ.....
 Ichthyol.....
 Lanolin.....â â 3 ij.

The ointment is spread upon a piece of surgical lint, and applied directly to the swollen gland. Cotton is next laid over the gland, and the whole is held in its place by a spica bandage, with firm pressure. This treatment is carried out every day until resolution takes place, which is usually accomplished in from ten days to two weeks. Twenty buboes have been treated in this manner, of which twelve were successfully aborted. Eight of the cases followed gonorrhea and four chancroid. Of the eight cases where the abortive treatment failed, six were cases of tubercular adenitis. The result of this treatment has convinced the writer that fully 50 per cent. of buboes other than tubercular can be successfully aborted by this treatment, provided only that it be employed before the formation of pus.

THE TREATMENT OF EMPYEMA.

To summarize the treatment of empyema the following propositions, according to E. Martin (*Therapeutic Gazette*), seem tenable:

I. Empyema is best prevented by promptly evacuating all considerable inflammatory effusions.