

vessels, organic disease of the liver, lungs, or abdominal organs; the tubercular, the rheumatic, the very old, and persons subject to cramp.—*D. H. Cullimore, M.D., in Medical Press and Circular.*

PERIPHERAL DIAGNOSIS OF MITRAL STENOSIS.—M. Perret, in a communication on this subject to the Société de Médecine, de Lyon, first described what he called *the hesitating pulse*, and showed the influence of the state of the circulation in its appearance, as well as its relation to the different forms of stenosis. He exhibited a series of sphygmographic and cardiographic tracings taken from his patients, from which, at present at least, it is difficult to draw precise conclusions. He showed what advantages, from a diagnostic point of view, are to be gained from the presence of this sign when it exists—for it is inconstant. He then called attention to the apex beat in certain cases of mitral stenosis as being of short duration and instantaneous. Lastly he showed how one may, by the application of the hand to the precordial region, easily perceive the re-duplication of the second sound, and closed by some remarks on the diastolic thrill. This is his method of peripheral diagnosis of mitral stenosis by the hand. In the second part of his communication, M. Perret showed that stenosis may be recognized by auscultation of the carotids without examining the heart itself. It is by hearing at this point the sound of the diastolic thrill, and especially the reduplication of the second sound, that one makes the diagnosis. The second method, then less certain than the preceding, of peripheral diagnosis of stenosis, is by auscultation of the neck. M. Perret closed by making some interesting observations on the reduplication of the second sound heard with the ear over the precordial region. He showed that it extends over an area much greater than has been formerly described, and that the position when it is most frequently found is over the third and fourth left intercostal spaces, and not towards the base; that it is possible to follow it occasionally towards the apex and into the axilla, or even round to the vertebral column.—*Lyon Médical.*

Therapeutic Notes.

As a head wash in cases of alopecia :

R—Creolin,	0.05
Hydrarg. bichlor.,	0.001
Aqu. rosar,	100.0
Aqu. distill.,	400.0 M.

As a mouth wash in cases of dental caries :

R—Tannin,	4.0
Potass., iodidi,	0.5
Tr. iodini,	2.5
Tr. myrrh,	2.5
Aq. rosar,	100.0 M.

Use a teaspoonful in a glass of warm water.

—*Centralblatt für Therapie.*

Antiseptic Cotton may be prepared as follows :—

Mercury Biniiodide,	p. 8
Potassium iodide,	p. 3
Glycerine,	p. 120
Distilled water,	q. s. ad p. 2400

Dip absorbent cotton in the solution and then dry it.

The first Napoleon, says the *St. Louis Med. and Surg. Journal*, was immediately relieved of habitual attacks of hoarseness by the following mixture, known as Foreau's syrup :—

R—Liquor. ammoniæ fortior,	Mx
Syrup. erysemi,	f3iiss
Infus. tilix florum,	f3iiss.—M.

Sig.—To be taken at one dose.

Erysemium or sisymbrium officinale is the common hedge-mustard.—*College and Clinical Record.*

RECIPES FOR PREPARATIONS OF IODOL.—
(*Pharm. Post.*):

Iodol solution:

R Iodol,	0.1
Alcohol,	16.0
Glycerine,	34.0

Iodol gauze :

R Iodol,	aa, 1.0
Resinæ,	
Glycerine,	
Alcohol,	10.0

Collodion with iodol :

R Iodol,	10.0
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