

fibrine." This substance, which is of hyaline structure, is found either in the lumen or in the wall of small arteries, and in areolar tissue in different pathological processes: thus it is found in the kidney in cases of senile gangrene; it is found in aneurismal sacs and in diphtheritic membranes; it is identical with Gull and Sutton's capillary fibrosis, and is evidently related to amyloid degeneration. Experiments on frogs have led Professor Recklinghausen to believe that hyaline is altered cell-protoplasm, which leaves the cell without the latter undergoing any material changes. Dr. Marchand described some cases of fatal poisoning by chlorate of potash; in all these cases large doses had been administered. The blood in all these cases showed a chocolate colour, due to the presence of methæmoglobin. The urine was albuminous, and contained altered blood, and the renal tubes were found filled with casts composed of altered blood-corpuscles.

Amongst the subjects discussed in the Medical section I will briefly allude to the following:—"Faradisation of the Stomach in cases of Dilatation and Catarrh of the Stomach." The method consists in introducing one insulated electrode, which is attached to the tube of the stomach-pump, into the stomach, and applying the other electrode to any part of the body. Though it is very doubtful whether, in this case, the walls of the stomach really contract, yet both Kussmaul and Ziemssen expressed themselves in high terms as to the benefit to be derived from the methodical application of electricity in such cases. Several papers were read on the therapeutic value of digestive ferment. Trials with the different preparations found in trade showed that nearly all German preparations were inert, while the only English preparation which was tested gave satisfactory results. Professor Kussmaul, finding that pepsine was always present in the gastric juice, even in very inveterate cases of gastric catarrh, does not believe that the administration of pepsine can be of much use. None of the speakers and experimenters seem to have attacked the subject from the practical point of view, such as has recently been done by Dr. William Roberts, of Manchester, who succeeded in completely peptonising milk with properly prepared pancreas extract, and who has thus opened out quite a new line of treatment for gastric disturbances. Pancreatic digestion is evidently beginning to interest the therapeutists as well as the physiologists.—*Lancet.*

## Miscellaneous.

McGill Medical College has 164 students this year—46 of these are freshmen.

JOURNALISTIC.—We have received No. 1, Vol. I., of the *Alienist and Neurologist*, published quarterly at St. Louis, U.S. Dr. C. H. Hughes, Editor. From the reputation of the editor, as well as from the appearance and contents of the first number, we think the journal will be a decided success.

APPOINTMENT.—William Eli Smith, of the town of St. Thomas, Esquire, M.D., to be an Associate Coroner in and for the County of Elgin.

VERRUCA.—Warts are often very troublesome, and refuse to disappear under acetic acid, muriate of ammonia, etc.; and I would call attention to their removal by means of the dermal curette, as has been advised in Vienna. This spoon-shaped instrument must be tolerably sharp, and by a careful kind of cutting movement around the wart it may be removed bodily, leaving a slightly depressed surface which bleeds a little; as this heals, perfect epidermis is formed, with no scar, and the wart generally remains absent. The little operation is hardly at all painful. I have experienced it on my own person, and have removed warts from children by it without their hardly knowing that it was done.

CUTANEOUS ERUPTIONS PRODUCED BY CHLORAL.—Martinet (*Thèse de Paris*, 1879) arrives at the following conclusions: 1. The ingestion of chloral excites, in a certain number of individuals, an exanthematic eruption, which may be called chloralic erythema, a sort of scarlatiniform eruption. Some observers have described urticarial and purpuric chloral rashes. 2. The erythema from chloral is seated chiefly upon the face, neck, and front of the chest, neighbourhood of the larger articulations on the extensor surface, backs of the hands and feet, etc. It appears after meals or after drinking alcoholic liquors. Most frequently fever is absent and the duration of the eruption