from the poisonous dose taken. Dr. Moor had made a special study of therapeutics and toxicology previous to the demonstration mentioned, and had experimented with rabbits, and also on his own person. He at first took an eighth of a grain of morphia, then a quarter of a grain, then half a grain, and finally three-quarters of a grain; and when he took permanganate of potassium afterward, there was no apparent toxic effect from the morphia. In his demonstration at the German Clinic he would have been perfectly willing, he says, to take six grains of morphia instead of three. Morphine, or any of the salts of opium, he claims, is immediately rendered harmless by contact with the permanganate. The antidote at once seeks the poison, passing by the other substances in the stomach. The soluble salt is acted upon by the permanganate 75,000 times more quickly than albumin, and several thousand times more quickly than peptone. Of course, the antidote should be administered as promptly as possible after the morphia is taken.

Since this demonstration, it has been claimed that the honor of the discovery is really due to Dr. William Condy, of London, and that Dr. J. B. Mitchell and other writers have referred to the efficacy of permanganate of potassium as an antidote; but, at all events, it is certainly true that its action in this regard has never been generally recognized by the profession. Lacerda recommended permanganate as an antidote to serpents' poison. Experiments indicate that it destroys the constitution of such poisons when brought into direct contact with them, but when introduced into the general system does not control their action. Dr. Moor is now engaged in making a series of experiments to test the power of the permanganate as an antidote against strychnia, cocaine, and other poisons. In the case of the first-named, its action is said to be much slower than upon morphia.

Morphia is well known to be a powerful reducing agent, and it is doubtless by oxidation that the permanganate acts. As with serpent poison, so with morphia, it is undoubtedly essential that the permanganate should enter into direct contact with it. After the morphia has been absorbed, the permanganate can have no action upon it. This physiologico-chemical restriction necessarily limits very

much any value as an antidote which it may be proved that it possesses. Really, as we already hinted, the most surprising thing about this incident which has attracted much attention in the daily press is the fact that the action upon each other of two substances, whose

action upon each other of two substances, whose properties are so well known as are those of morphia and permanganate, should not long since have been accurately determined and described and generally recognized. As a matter of fact, the usual therapeutic text-books

and toxicologies are silent on this subject,—
Ed. Coll. and Clin. Record.

RECENT SUGGESTIONS IN THERA-PEUTICS.

ASIATIC CHOLERA.—Two or three tumblerfuls daily of infusion of black coffee, strong and hot, causes improvement in patient's condition, increases secretion of urine and strengthens pulse. (PROF. D. P. DUEBELIER, Vratch, No.

42, 1893.)

DIPHTHERIA.—One-half to I teaspoonful sp. turpentine four times daily. Also, Tr. ferrimur., \(\frac{7}{3}\)j (31 grammes); potass. chlorat., 3iss (6 grammes); ac. mur. dil., 3ij (8 grammes); glycerin, q. s. ad \(\frac{7}{3}\)iv (124 grammes). Teaspoonful every three hours; swab throat with mixture. (C. FERDINAND DURAND, Archives of Pediatrics, January, 1894.)

Acctous vapor, applied by the author in one case as follows: One quart (litre) of malt-vine-gar placed in a steam-kettle on fire, pouring a stream of vapor into the room; the child was covered by an umbrella to focus the steam; tonsils and pharynx painted with brandy every two minutes until cough, expectoration and drowsiness occurred. (W. A. GREET, British Medical Journal, January 27, 1894.)

Calonel, I to 5 grains (0.065 to 0.32 gramme), every five hours, according to age of patient; catharsis checked by Dover's powder. (W. R. McMahan, Northwestern Lancet, Jan-

uary 15, 1894.)

Corrosive sublimate solution, 1 to 2 per 1000; Laplace's solution (corrosive sublimate, 1; tartaric acid, 5; to water, 1,000); or, corrosive sublimate, 1; common salt, 6; water, 1,000: 2 drachms (8 grammes) every four hours used as a spray; gargle with thymol, boric acid, or lime-water. (ESCHERICH, Wiener klinische Wochenschrift, vol. vi, 1893.)

Dysmenorrhea.—If congestive or inflammatory, citrate of iron and quinine, I gramme (15½ grains); alcohol (90 per cent.), 10 grammes (2½ fluidrachms); water, 190 grammes (6 fluidounces); one teaspoonful before meals in a little water or white wine, during intermenstrual period. During period, salicylate of soda and analgesin, aa 0.15 gramme (1/4 grain) every two hours, alternated with tincture viburnum prunifolium, 2 grammes (31 minims); Elixir of Garus, 30 grammes (1 fluidounce; syrup of peppermint, 15 grammes (33/4 fluidrachms); distilled water, 100 grammes (3¹/₄ fluidounces). If pain be intense, with excitement and insomnia, give, at bed-time, hydrate of chloral and bromide of strontium, aa 6 grammes (1 1/2 drachms; tincture of cannibus Indica, 15 drops; syrup of orange-peel, 60 grammes, 134 fluidounces). Tablespoonful