lunacy, restraint, the experiences of various authorities, the use of purgatives, general and local bleeding, counter-irritation, antimony, and mercury. Then I would have ventured to indicate some cautions and limits concerning certificates and the mode of examining patients, to draw attention to the risks to the sanity of households where patients are treated, and have mentioned the legal steps and precautions necessary with each place of treatment, whether at home, in hospitals, or in private or public My excuses for outlining the home care of lunacy before the members of this society are that much has been done of late to increase our knowledge of successful treatment, and that many of those who are fully occupied in general practice have little opportunity for investigating the deductions of those working in a special field.—Practitioner.

THE THERAPEUTICS OF EPILEPSY. BY ALLAN MCLANE HAMILTON, M.D.

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The object of this paper is the discussion of the present method of treating that most discouraging and imperfectly understood form of disease, Epilepsy. I wish more particularly to consider the value of the bromides, and at the same time to detail recent investigations undertaken to support a statement I made at the last meeting of the American Neurological Association, where I advocated the medium dose, and endeavoured then to show that of late there is an unwise tendency to administer these drugs in dangerous quantities.

I may be pardoned, perhaps, in calling attention to certain practical points which may appear unimportant to some, but an experience gained from the management of a great many cases teaches me they are to be carefully considered in selecting a plan of treatment. These simple indications, I am convinced, are too often overlooked, even by painstaking and careful medical men. I allude to the necessity for discovering the exciting cause. I am every day made to feel that the idiopathic cases do not form so large a proportion as they were once thought to. With this belief I am satisfied

that empiricism and routine management are bad methods. Any one who examines all his cases thoroughly will recognize the delicate shades in epilepsy, variations which are exhibited in other diseases presenting more pronounced and better defined symptoms; consequently there are evidences of pathological action, which are not always grouped alike, and consequently all cases are not to be treated in the same manner. I ascribe the moderate success I have had in the management of this disease to the recognition of these differences.

Not only may obstinate epilepsy result from masturbation, but it may be due to many of the diseases of women, and is produced by other eccentric irritations of various kinds, or by centric irritation, such as may be associated with toxemia.

Sir Charles Locock (Med. Times and Gazette, May 23, 1853,) called attention to many cases that he had treated where uterine irritation was the exciting cause; and I think others have had the same experience. In one of Locock's cases the patient was affected particularly at the menstrual periods.

Some of these peripheral causes are curious in the extreme. Through the kindness of Dr. Gibney, of New York, I was enabled to see a child who had accidentally injured her ear with her parasol, the brass tip of which remained for some time imbedded in the external auditory meatus. As a result, convulsions of an epileptic character were caused, and it was not until some time afterward that the foreign body was discovered and removed. In another case I treated, the epilepsy was unmistakably due to a bad habit the woman had of wearing a number of heavy garments about her hips, which produced some uterine change. When this condition of affairs was noticed, and the skirts removed, she immediately recovered. root of many epilepsies, as well as other neuroses, are reflex causes—the starting point being the organs of digestion, or those contained in the pelvis. Of course there are varieties of epilepsy of an idiopathic nature, or others caused by traumatism or organic disease; and these will defy the best directed efforts of the physicians, and we can do nothing.

We should not lose sight of syphilitic epi-