In cases of Gastric Ulcer accompanied by vomiting, Prof. Hare says the vomiting must be checked on account of the danger of hæmorrhage, and for this purpose he advises rectal injections of the following prescription:—

According to Prof. Hare, the following prescription will be found very useful in cases of Subacute Gastritis, occurring in persons who are careless in eating and are annoyed with belching of food after eating:—

B.—Oleoresin. capsici, . . . . gtt. xv.

Pancreatin., . . . . . . gr. xx.

Pulv. zingiberis, . . . . gr. xv.

Pulv. carbonis ligni, . . . gr. xv.

M.—Fiant pil. xx.

Sig.—One, twice a day.

-Coll. and Clin. Record.

SEASONABLE SUGGESTIONS.—With the opening of the winter season, and its attendant bronchial and pulmonary troubles, we are having from many sections reports of a recurrence of the La Grippe epidemic which for the past six or seven years has afflicted the country. This fact makes particularly pertinent a recalling of the salient points of Dr. V. W. Gayle's paper first published in the Medical World in the midst of La Grippe's most malignant visit. It will be well to note closely his recommendations and experience in connection with the recurrence of the epidemic which is now apparently upon us. He says: "This disease, by proper treatment of an attack, can be so modified as to be almost aborted. If not properly managed, influenza is particularly liable to grave complications, even in mild cases the tendency is towards prostration, and often the nervous shock is such as to materially debilitate the patient. Where there is much angina with acute bronchial irritation, the following is indicated:

R-Ammon. chloridi, .					7 ji
Detarati allanat	•	•	•	•	<i>.</i>
Potassii chlorat, .		•	•	•	3 J.
Tinct. ferri chloridi,					3 ij.
Syr. simplic,					ã ij.
Aquæ,		q.	s.	ft.	3 iv.—M

Sig.—Teaspoonful in sweetened water every four hours, also apply to the throat with probang every three hours.

Quinine is the best germ destroyer we have for the microbe of influenza. During the recent epidemic I aborted quite a number of cases with antikamnia and quinine in combination; also with antikamnia and salol. The relief obtained by the administration of antikamnia alone, where the cephalalgia was severe, as in the majority of my

cases, was wonderful. When the pain seemed almost intolerable I have seen a ten-grain dose banish it.

Mustard pediluvia are of great advantage, and a plaster of mustard and lard, one part of the former to two of the latter, applied directly to the chest, answered admirably as a mild counterirritant.

Expectorants are often needed, and antikamnia should be administered with them, thus:

	(genuine),							3 j.
Syr. senega,								ξj.
Vini ipecac,								д iij.
Syr. tolutan.					q	. S.	Ít.	₹ iv.

Mix and let stand until effervescence ceases.

Sig.—Teaspoonful every two hours.

The mild chloride of mercury in minimum doses often repeated will be beneficial. The following prescription is a favorite of mine:

M.—Ft. Chart No. X.

Sig.—One every hour until all are taken, followed by a full dose of Hunyadi Janos water.

Antikamnia and quinine tablets, containing  $2\frac{1}{2}$  grains each of antikamnia and quinine, also antikamnia and salol tablets, containing  $2\frac{1}{2}$  grains each of antikamnia and salol, offer the best vehicle for exhibiting these combinations, giving one every two or three hours.

Gayle concludes his paper as follows: "What is mostly needed is an antithermic analgesic to relieve the pain and reduce the fever. These properties are found in antikamnia. This, with the germ destroyer, quinine, is all that I really needed in the treatment of this disease. I advocate the use of stimulants in nearly every case. They are frequently needed in the onset of the disease. Sprays of carbolic acid, turpentine or resorcin are frequently efficacious in the laryngeal troubles. The diet should be light and easily digestible, By careful attention and avoidance of exposure, together with the line of treatment mapped out, the vast majority of cases will recover. Of course. there are occasional cases which present symptoms which require other remedial agents, but these, of necessity, must be left to the discretion of the medical attendant."

BISMUTH SUBGALLATE OR DIGESTIVE FERMENTS?

—The present furore in favor of bismuth subgallate is likely to prove its worst enemy because its general use in all forms of indigestion will eventually create a reaction against it, causing it to fall into disuse. That the remedy is a useful one in certain forms of functional dyspepsia cannot be denied, but to be successful clinically the diet must