excessive bleedings practised by the disciples of Rasori. Dr. Todd merely held that alcohol increases nerve nutrition, or prevents its decrease in disease, strengthens the heart, lessens the rapidity of the circulation, so common in pyæmia or fever, and shields the tissues from oxidation, all which I have observed over and over again. My excellent friend, Dr. E. Smith, says he sees no ground for the statement that hydrocarbons have this especial affinity for the nervous system, taking starch and oil as the representatives of this class; but starch is not a hydrocarbon at all, and most decidedly, as far as alcohol and chloroform are concerned in disease, Dr. Todd is wonderfully correct. I can quite understand the presence of alcohol in the blood, even when unchanged, doing all that Todd supposed it to do. There is one aspect, however, of the alcohol question, which appears to me by some refraction or optic polarity always to be above or below, or out of the angle of coloured vision of our clear-seeing men who follow the chemical theorists, and it is this—that if a poor man out of doors, who is accustomed daily to drink more or less alcohol, comes into hospital with a broken thigh, with bad erysipelas, or an anthrax of the well-known legendary size of a willow pattern dinner-plate, this man will assuredly sink if you follow the teetotal observances of Marcet or Carpenter. I can scarcely go as far as Dr. Lankester, who would lead us to suppose, all cases of pyæmia arise from bad sanitary conditions, foul drains, &c. Indeed, I know this is not the fact, as pyæmia is much more common in certain surgical cases than others, such as cases of amputations, where the cancellous structure of a bone has been sawed, or diffuse abscesses of areolar tissue, &c., than in such cases as removal of fatty or cancerous tumours. Chloroform has been blamed for some of these accidents of pyæmia, and it is rather a relief to find that it is innocent of the mischief laid to its charge. Finally, if softened fibrin corpuscles be the real secret of pyæmia, we have at once the key to the use of the acid tincture of the sesquichloride of iron, acid quinine mixtures, claret (so much used in England), aconite, acids with bark, oxygenated water, chlorine, &c., &c.—*Dublin Medical Press.*

MEDICINE.

CASE OF CROUP IN THE ADULT.

Dr. Robert Bruce read before the Medico-Chirurgical Society of Edinburgh, the history of a case of croup occurring in a woman aged twenty-five years. The symptoms and course of the disease resembled very much that occurring in the child; false membrane was formed and expelled at different times by coughing. The treatment consisted in leeches to the larynx, followed by warm poultices, inhalation of the steam of hot water, small doses of antimonial wine, and calomel and opium at intervals, moderately full doses of solution of muriate of morphia, warm bath, and nitrate of silver locally. There are some points of interest connected with this disease as it occurs in the adult, and the most important one may be found in the fact that the greater width of the air passages, the superior strength and intelligence of the patient, enabling him to free himself of the viscid secretion, help to render this disease far less dangerous in the adult than in the child. The moderation of the symptoms presented in this case led the writer to entertain the idea, that possibly cases of croup in the adult are not quite so rare as has commonly been supposed; many cases passing under the name of severe cold catarrh, which in the narrow trachea of a child would be confirmed croup, owing to the inability of the little patient to throw off the secreted fluid before it forms a film or membrane. It is ascertained that, in children, males are more frequently attacked than females, while in the reported cases of adults the majority are females. The lesser degree of development of the female larynx may, in a measure, account for the latter fact.—*Edinburgh Med. Jour.*