mence by sprinkling the ulcer or fistula with iodoform, then we apply the nitrate of silver over the whole surface, and again sprinkle all over with iodoform. Effervescence occurs with formation of nitrous acid, iodine, iodide of silver, and perhaps also nitric acid and other combinations. These different bodies act on the tissues in the nascent state. The great advantage of this method is that the cauterization is strictly limited to the surface to which we apply the caustic. The fistulæ and ulcers cicatrize under an antiseptic covering of iodoform and iodide of silver. We have employed this caustic in the treatment of sinuses consecutive to resection of the hip. A fœcal fistula following a gangrenous hernia cicatrized after two applications, after all other methods had failed. It would probably be useful in ulcerated chancres. -Nord, Med. Arkiv,-Jour. de Med. de Paris.

MEDICAL EDUCATION OF WOMEN.

Miss Jex-Blake, M.D., writes in the Times to announce that the Scottish Colleges of Physicians and Surgeons (of Edinburgh and Glasgow) have just decided to throw open to women their conjoint examinations and "triple qualification" in medicine, surgery and midwifery. Every one interested in the subject is no doubt aware that the Irish College of Physicians opened its examinations and diplomas to women, immediately after the passing of the Russell-Gurney Enabling Act in 1876, but it is not so generally known that the Irish College of Surgeons also opened its doors last year, and that at the latter College women are now freely admitted to all the medical classes, with separate arrangements for practical anatomy only. The University of London, the Royal University of Ireland, and the Victoria University, have also opened all their examinations and degrees to women. Medical education is now, therefore, available to women both in London and in Dublin, and she hopes that classes will within a few months be reopened in Edinburgh-Brit. Med. Jour.

SOOTHING APPLICATION IN NEURALGIA. — Mayet has presented, before the Socièté de Thèrapeutique, the following formula for a very

neat and compact local application for use in neuralgic affections :---

Chloral hydrate	5	parts.
Chrystallized menthol		
Cacao butter	10	**
Spermaceti	20	"

These constituents are mixed into a paste, which is divided into pieces about two-fifths of an inch square, and weighing about thirty grains.

Chloral thus applied in cacao butter has no local irritative effect. The part affected is to be gently rubbed with one of the squares, which is then allowed to melt at the most painful point.—Journal de Medicine de Paris. Maryland Med. Journal.

OBSTINATE VOMITING —Dr. W. L. Davis (*Miss. Val. Med. Monthly*) reports a case of vomiting in typhoid fever, in which every remedy, even pellets of ice, was rejected by the stomach. He applied ice to the lower part of the spine in considerable quantity, and the vomiting immediately ceased; a profuse perspiration followed. The use of ice was only persisted in when indicated; and cool sponging was instituted with marked benefit, so that the ice was only occasionally required. Recovery in the average time took place.—*Therapeutic Gazette.*

MORRHUAL.---Morrhual is obtained from cod liver oil by shaking it up with alcohol (90°) and distilling the alcohol freed from the oil; or by treating the oil with an aqueous solution of carbonate of soda, which frees the acids at a low temperature. In both cases the oil becomes almost colorless, odorless, and approaches in character the oils obtained from animal fats. The acquired product, morrhual, is astringent, bitter, very aromatic, and crystallizes at ordinary temperature. It contains phosphorus, iodine and bromine in considerable quantities, ten to twelve times the amount in the original oils. The quantity obtained depends on the quality . of the oil. The brown oil contains $4\frac{1}{2}$ to 6 per cent., the yellow $2\frac{1}{2}$ to 3, the white $1\frac{1}{2}$ to 2. The morrhual appears to be the active principle of cod liver oil and may be given in