

expressions of opinion with respect to these cases were too optimistic, especially so in regard to typhoid ulcers. His experience was limited to five cases. In three of these he operated; in the fourth he regretted that he had not operated, and in the fifth the patient vomited pus and passed a large quantity of pus per anum, but after a perilous time ultimately recovered. In one of the cases upon which he had operated, recovery followed. He agreed that the less done in perforating typhoid ulcers the better.—*Lancet*, August 4, 1894.

ASSOCIATION OF AMERICAN PHYSICIANS.

TREATMENT OF CERTAIN SYMPTOMS OF CROUPOUS PNEUMONIA, PARTICULARLY IN ADULTS.—Dr. BEVERLEY ROBINSON, of New York, laid special stress upon the management of two symptoms of the first stage of the disease, namely, pyrexia and pulmonary congestion. He does not use the modern antipyretics, except in special cases. Phenacetin he regards as the best of these, for the reason that in addition to its antipyretic action it also induces sleep. The spirit of mildererus, potassium citrate, and magnesium sulphate he uses largely. Quinine, in doses of 2 to 4 grains (0.13 to 0.26 gramme) every three hours, is antipyretic. Cold sponging and cool baths are not especially efficacious; if the temperature of the patient is over 104° F. (40°C.), and the pulse is rapid and delirium is present, a tub-bath may be advantageously employed. He has seen bad results, however, following immersion in a tub-bath; sponging, with friction, is preferable. The advantage of the bed-bath is the avoidance of shock and exposure, and the ease with which it can be given. The bath should last from fifteen to thirty minutes, and is to be repeated whenever the temperature is over 103° F. (39.5° C.); prompt relief follows, the temperature falling to 100° F. (37.8° C.).

Aconite and aconitine act by diminishing the heart's action through its motor ganglia. The heart is slowed in a very alarming manner, and may be arrested in diastole; 1-150th grain (0.00043 gramme) of aconitine may produce serious results; hence he does not believe in its uses. The administration of small and repeated doses of antimony oxysulphuret, 1-32nd grain (0.002 gramme), every hour or two hours, is much superior to the use of aconite. It renders the sputum more fluid, and therefore easier of expectoration, and in this way diminishes the dyspnoea. It is also well borne by the aged and by children. It may be used in both the first and second stages of the disease. Nitroglycerin, by the mouth, or, better, hypodermatically, in doses of 1-50th or 1-25th grain (0.013 or 0.0026 gramme), is an excellent remedy in this disease. It strengthens the weak pulse, removes the cyanosis and relieves

the dyspnoea. Inhalations of oxygen in pneumonia usually give relief, but in some instances the dyspnoea is increased by its use. Especially in cases of general oedema have unfavorable results been noted. In favor of the right heart inhalations are, according to some authorities, of marked service, though the subject is still open for discussion. The abundant use of cold spring-water, Apollinaris, and other table waters is of service in promoting diuresis and diaphoresis, and in this way reducing the abnormal temperature of the body. Alcohol is beneficial in many cases, not only on account of its nutritive value, but also because it aids the respiratory function. It also gives nerve-force, controlling the adynamia and nervousness. There are only two contra-indications to its employment, namely, when the patient is plethoric and when there is hepatic engorgement and gastric catarrh. In these cases, small and repeated doses of calomel will act in the most beneficial manner. Digitalis or digitalin in small doses may be given to control an irregular heart; otherwise either is not to be used, on account of inducing vascular contraction. Strychnine by the mouth or hypodermatically, from 1-30th to 1-16th grain (0.002 to 0.004 gramme), is a very useful drug; at times, however, it may produce nervous irritability. Nitroglycerin acts by bleeding from the veins into the arteries, in this way taking the place of the old method of bleeding, which was often followed by excellent temporary results. In cases of threatened heart-clot, venesection, followed by injections of salt solution, may yield excellent results. Black coffee is of service when other remedies cannot be borne by the stomach, and may tide the patient over. Caffeine does not replace the use of coffee, for the reason that it is merely an alkaloid, and does not possess the nutritive value of the coffee.

Dr. Peabody, of New York, remarked that pain, with insomnia and cough, is an urgent symptom of croupous pneumonia, that could be controlled by the use of small doses of morphine hypodermatically, as grain 1-6th (0.01 gramme) repeated once or twice during the night. He objects to the too frequent use of water in reducing the temperature. He has very rarely found heart-clot as a pathological feature in this disease, and believes that many of the so-called cases of ante-mortem clot are in fact but post-mortem clots.

Dr. J. C. Wilson, of Philadelphia, believed that, owing to the varied clinical manifestations of pneumonia, the treatment must be largely expectant and symptomatic. Cold baths have not been satisfactory in his hands. Local applications of cold to the chest have been advantageous in many cases. In sthenic cases, with delirium and other nervous manifestations, affusions of from one-half to one gallon of cold water, poured over the head and shoulders,