

not always an easy matter to avoid the undesirable effects of therapeutic agents; and when they must be resorted to, it becomes necessary to provide against and ward off these effects by suitable additions and combinations. There are no serious drawbacks to the use of belladonna, and the dry throat and indistinctness of vision are usually borne by the patients without complaint.

The arrest of the profuse and exhausting night-sweats is usually followed by more or less immediate improvement; and belladonna very rarely fails to achieve this arrest. The systematic use of anhidrotics must grow with further acquaintance with them, and especially with belladonna; and the public, as well as the profession, are under a deep debt to Dr. Ringer, which, I trust, this paper will do something towards demonstrating. Belladonna seems to be a specific anhidrotic, acting on the sudoriparous glands as it does on the submaxillary gland. Heidenhain (*Pflüger's Archiv.*, vol. v., p. 40,) indicates that belladonna may be found to affect other glands than the submaxillary by acting on their secreting nerves. Such seems to be its action in the arrest of hidrosis; which it effects when applied locally as well as when given by the mouth or injected hypodermically.

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THE NIGHT CRIES AND NIGHT STARTINGS OF CHILDREN.—Caspary attributes them to frightful dreams. In children under a year old, and especially in delicate, anæmic children, they are associated with mild or severe convulsions. He uses as a specific, bromide of potassium, and according to the age gives 0.5 grmm. to 1.5 grmm. (gr. $7\frac{1}{2}$ to gr. $23\frac{1}{2}$) a day. (Gr. xxv. potas. brom., aq. ʒiiss—ʒi four times a day). According to Edlefsen's experience bromide of potassium always causes quiet and peaceful sleep in young children, but does not act so well in older ones. It acts well in convulsions, teething and meningitis. He gives a strong six months old child 0.5 grmm. ($7\frac{1}{2}$ grains) three or four times in the day, or once or twice in the evening. Younger and less robust ones, he gives 0.25 grmm. as a dose. In older children he often increases the dose to 0.75 grmm. several times a day. (*Deutsche. Ztsch. f. Prakt. Med.* 28, p. 234, 1876, and *a.a.* 0.38, p. 412, v. Dr. Edlefsen in Kiel.) Quoted in *Schmidt's Jahrbucher*, Bd. 172, No. 11, 1876.—*Can. Med. and Surg. Journal.*

THE DISCRIMINATION AND TREATMENT OF NEURALGIA.—I have for several years used a simple and ready method of discovering whether stimulants and tonics, or whether alkalies and aperients, would be more likely to cure any given case of facial or dental neuralgia. The patient is first directed to hold warm water in his mouth, or to otherwise apply warmth to the seat of pain; and if little or no relief is thus gained, but especially if, as often happens, the pain is actually intensified, then to employ cold water in a similar way. If the cold water relieve the pain, this is regarded as being chiefly due to impurity of blood; and I have always found that it is relieved with certainty by magnesia and dieting. If, on the contrary, warmth relieve the pain very distinctly, then tonics, varying as the locality (district), constitution of patient, and precise causation, are surely indicated, and will, if in sufficient doses and combined (when necessary) with sedatives, remove—for a time at least, but often altogether—the insufferable pain. Many cases have occurred in which patients, at first resolutely bent upon having one or more teeth extracted, have been enabled to retain them for years simply by putting in practice this test and its associated treatment. There are some cases of neuralgia in overworked persons in which both plans of treatment are required. A man catches cold and has hemicrania. He is better out-of doors; but, upon entering a warm room, is shortly in unendurable pain, especially about one eye, which becomes congested and tear-streaming. A single large dose of magnesian aperient, followed by ten, or fifteen-grain doses of ammonium chloride in infusion of bark, will remove this condition. Again, the same patient may at one time require the magnesia plan and at another time the tonic and stimulant plan for pain in the selfsame nerve, this difference being shown and the proper method suggested by the altered effect of cold and heat; and it is probably the want of recognition of this fact which produces the apparent fickleness and uncertainty of any particular drug, such as phosphorus, guarana, quinine, etc., in this disorder.—T. CHURTON, M.B., Physician to the Leeds Dispensary.—*Brit. Med. Journal.*