

doubt that many patients taking cod liver oil increase in weight, much more than by the actual amount of oil consumed. So that Prof. Germain Sée's statement that "cod liver oil is not only a nutritive, but owes its virtues to the active principle, which renders profitable and assimilable the carbo-hydrates and fats ingested," is unquestionably correct. If, now, "Morrhual," be the principle upon which this assimilation of carbo-hydrates and fats *depends*, it should be very beneficial taken in connection with creasote, and we believe that it is worthy of a trial, at any rate in those cases where the stomach will not bear cod liver oil in any of its forms as now upon the market.

The surgical treatment of the disease will always be confined to one-sided cases. We cannot here enter upon the subject, but shall append the following by Prof. Tillmans, of Leipzig, *Br. Med. Jour.*, as showing what has been done and what may be done by the surgeon for the cure of the disease :

"I recommend that in similar severe cases of one-sided tuberculosis of the pleura and lung the same procedure should be adopted as I carried out in the case related, that is to say, the seat of disease should be exposed sufficiently for local surgical treatment by free resection of the chest wall in front or behind. In suitable cases the performance of a temporary resection of the chest wall may be recommended. A pedunculated flap of skin and bone is formed, and turned back, and afterwards when the disease of the pleura and lung is cured, the thoracic coverings are replaced in their original position. One can also proceed in such a manner that, after extensive resection of the ribs, the soft parts in the chest are divided in the direction of the lung, the flaps of soft tissues drawn apart with wound hooks, the pleura and lung subjected to adequate local treatment, and then the soft tissue flaps united to the pleura by compression. In my above related case I was obliged to remove the anterior part of the left chest wall *in toto*, as it also was extensively diseased."

In the case related there was a perfect cure, the man being after two years quite well and able to attend to his business as a merchant as before.

Dr. O. C. EDWARDS, of Ottawa, has been appointed Associate Coroner for the County of Carleton.

ONTARIO MEDICAL LIBRARY ASSOCIATION.

At the annual meeting of the Association the following officers were elected :—

President—Dr. J. E. Graham; *Vice-Presidents*—Drs. A.A. Macdonald, Temple, and Moore, of Brockville; *Treasurer*—Dr. McPhedran; *Secretary*—Dr. James McCallum; *Curator*—Dr. N. A. Powell; *Assistant Curator*—Dr. Wishart; *Trustees*—Drs. R. A. Pyne, Britton, and Pepler.

During the year, the number of volumes in the Library has been doubled. The Association enters on its new year free from debt, and with assets of \$5,545. Fifty-six Medical Journals are regularly on file. Arrangements have been made by which city physicians, or those residing at a distance, may take books from the library for a week at a time. Duplicate copies of various journals have come into the possession of the Association. These will be gladly exchanged with physicians who may wish to complete their sets.

SULPHONAL.—Dr. H. M. Field, Professor of Therapeutics in Dartmouth College, read a paper before the American Medical Association, at Nashville, on Sulphonal, which he defines to be a mild calmative, a slowly but progressively acting hypnotic, having no other action, and its operation being attended by no complications, near or remote. It is thus the only pure hypnotic that we possess. We do not know how it acts, nor through what modification, wrought by the digestive process, it is made soluble, and so admitted into the blood; nor do we know in what chemical state, and through what avenue it leaves the body. It has no anodyne effect. A high state of pyrexia will often minimize or wholly defeat the hypnotic power of the drug; and failure sometimes arises from idiosyncrasy. It is not contra-indicated by any disease, and may be used for all ages. The period of therapeutic incubation is about two hours, and therefore the patient should not expect sleep before that time, but may attend to other duties in the meantime.

Commercially speaking, so many grains of sulphonal will buy so many hours of sleep. Dose for adult is 15 grs., repeated in two or three hours if necessary, and this may be decreased to 12, 10, or 8 grs., after a few days.