ner, it can produce a favourable change in the carbuncle, depriving it of its deleterious character, states that this cauterisation is always, so far as the medical attendant is concerned, a practice which demands the greatest attention, because this caustic agent so readily becomes liquid on exposure to the air, and can then burn more deeply than the physician may He also recalls with emphasis, and as desire. giving support to his point of view, two new observations, in which he recommends the methodical and energetic employment of grey mercurial ointment as an abortive remedy in cases of anthrax and furunculus, a remedy which he extols again as mild, innocuous, sure, and speedy. In a few hours it causes a mitigation of the violent pains in the neighbourhood of the carbuncle, and in three or four days causes them to disappear completely, whilst the anthrax does not only not extend further, but even becomes less in all its dimensions, so that in about a week the patient is no longer inconvenienced, and at the end of some days the swelling is entirely dissipated.—Revue de Thêrapeutique Médico Chirurgicale.

CURE OF AMBLYOPIA AND AMAUROSIS BY THE NITRITE OF AMYL.

From the Gazetta Medica Italiana.

A lady, forty-two years of age, not having menstruated for two months, was seized with a severe metrorrhagia, which lasted a whole day, and was followed by great prostration. After five days the vision of the right eye was perceptibly diminished. In the evening the amaurosis was complete; on the following day the left eye was seized. At the end of about a week, the time necessary for the partial restoration of her strength, the lady presented herself to Dr. Steinheim. On the left side the blindness was complete. On examination the retina of the left eye appeared at one point to be sensible of the action of the light; the pupil was moderately dilated, but absolutely immoveable. The dioptric media remained transparent, but the opening of the pupil was grayish white and turbid. The margin was surrounded by tortuous vessels, arterial and venous. artery was conspicuous from its fineness; but,

on the other hand, the vein was engorged with bleod and much dilated. The author poured out on some cotton eight drops of the nitrite of amyl, and directed the patient to forcibly inhale the vapour. When the vascular turgescence, caused by the inhalation, subsided, the dose of the liquid was repeated. Subsequently the patient was kept in a darkened room and strictly dieted. The medicated inhalations were employed several times during the day, Nine days after the commencement of this treatment, the amelioration was perceptible and, after five weeks, the cure might be regarded as complete.-Revne Med. Chir. de Vienne e Bulletin Gén de Thérap., Dec., 1876.

TREATMENT OF CONVULSIONS IN CHILDREN.

From the Revista Medico-Quirurgica of Buenos Ayres.

M. Blachez, in charge of the Supplementary Children's Clinic, laid down in one of his last lectures the following rules of conduct which ought to guide our practice in these cases:

If the attack is single, and shows no signs of recurrence, the physician ought to content himself with calling hygicanic measures into force, such as proper conditions of ventilation, &c. If the attacks are persistent or repeated at short intervals, revulsives should be employed, running over the whole of the lower limbs, and applications to the temples of compresses wet with cold water, or water mixed with ether.

At the same time it is right to employ compression of the carotids recommended by Trous-By this means the improvement commences in two or three minutes, and if, after this time, it does not manifest itself in a very evident manner it will be useless to persist in it. Then it will be convenient to have recourse to inhalations of chloroform, given gently, and never in a rough manner, it being here more important than ever to remember the sage precept of allowing the air to penetrate, mixed with the vapours of chloroform. cases there may be some special indication to fulfil, as for example, the administration of an emetic, if it is well established that indigestion is the cause of the convulsion.

Once the attack subsides, it is necessary to modify the general eclamptic tendency, by