

cal centres in France, and possibly even in the medical metropolis of the United States, but the medical man in this section who prescribed such a course in the treatment of his cases of acute gonorrhœa would most assuredly treat very few cases of this disease. My plan is to treat gonorrhœa at any stage. Why not? If we will adapt our remedies to the stage, physical condition and individual peculiarity of patient, I fail to see why we should leave nature to struggle single-handed with her adversary until she had well-nigh conquered. We do not hold our hands in the acute stage of inflammatory affections of other organs, and why this? I think the hot-water irrigations equally adapted to the acute stage. I begin them the very first day the case presents itself, and know of no treatment better than the action of hot water. I use a good-sized fountain syringe well filled with hot borated water—well filled, for thus the heat is retained during the entire time necessary to make a proper application. To the pipe attach a glass tube, and over the end of this for two inches draw a soft rubber catheter; anoint well with carbolized vaseline or oleate of cocaine, if the parts are very much irritated, or better only sensitive; and here one may easily over-estimate the amount of hyperæsthesia, for one may often pass this catheter, causing very little pain. Introduce the catheter carefully one inch, turn on the hot borated solution, and after you are satisfied all is clean as far as you have gone, very gently and gradually push your catheter into the deeper urethra, and even into the bladder, if one's judgment deems it advisable, allowing, all this time, the water to flow out all around your catheter. The object is to thoroughly cleanse the urethra as you enter. Your fountain should not be elevated more than two feet above the patient. These irrigations should be repeated at least daily, and at least a quart of the hot solution consumed; often two quarts is better. Follow these irrigations after two hours' time with some soothing mucilaginous sedative injection of not more than half a drachm thrown gently in, and repeat each six hours in the acute stage; but in the subacute or chronic I like the morphia and zinc better than anything I have yet tried.

R—Morphia sulph., . . . . . ʒ iv.  
Zinc acetate, . . . . . gr. j.  
Aqua, . . . . . ʒ iv. ad. vj.

I have pursued this plan of treatment for several years, and with commendable success. The patient will pass out of his physician's hands with a grateful heart and free from stricture.

SOME MEDICO-LEGAL POINTS IN REGARD TO MALPRACTICE.—The following points with regard to a physician's liability in suits for malpractice are given by R. C. B., in the *General Practitioner*.

1. A physician is guilty of criminal malpractice when serious injury results on account of his gross ignorance or gross neglect.

2. A physician is guilty of criminal malpractice when he administers drugs, or employs any surgical procedure, in the attempt to commit any crime forbidden by statute.

3. A physician is guilty of criminal malpractice when he wilfully or intentionally employs any medical or surgical procedure calculated to endanger the life or health of his patient, or when he wilfully or intentionally neglects to adopt such medical or surgical means, as may be necessary to insure the safety of his patient.

4. A physician is civilly responsible for any injury that may result to a patient under his care, directly traceable to his ignorance or his negligence.

5. A physician is expected by the law to exhibit in the treatment of all his cases an average amount of skill and care for the locality in which he resides and practices, further than this he is not responsible for results, in the absence of an express contract to cure.

6. A physician is not relieved of his responsibility to render skilful and proper treatment or reasonable care and attention, by the fact that his services are gratuitous.

7. A physician is not obliged to undertake the treatment of any case against his will, but having once taken charge, he cannot withdraw without sufficient notice to allow his patient to procure other medical assistance.

8. A physician having brought suit and obtained judgment for services rendered, no action for malpractice can be thereafter brought against him on account of said services.

9. A physician is relieved of all responsibility for bad results in connection with the treatment of a case, when there can be proven contributory negligence on the part of the patient.