

After some time, the antiseptic solution is replaced by more astringent solutions, as those containing tannin, boric acid, alum, or antiseptic vinegar; and when the mucous membrane of the posterior part of the nasal fossæ is very dry, the following solution is used:

Salol,	gr. lxxv
Olei Petrolei,	f oz. v

Fumigations and inhalations also give good results. The following solution, which is heated over a water-bath, should be employed for inhalation for one or two minutes after the irrigations, such as:

Camphoris,	dr ii
Tincturæ iodî,	f dr. iiss
Potass iodidi,	dr. ss
Picis,	dr. iii.
Alcoholis (900),	f oz. iii
Aquæ	f oz. viii

Insufflations of powders should, in general, be abolished.—*Med. und Surg. Reporter.*

THE PHYSIOLOGICAL ACTION OF EXALGINE.

In the *Bulletin Général de Thérapeutique* September 15, 1889, Dr. Gaudineau publishes an elaborate essay on the physiological, chemical and therapeutical properties of methylacetanilide, or exalgine, the new hypnotic recently described in several numbers of the *Therapeutic Gazette*. The author formulates his conclusions as to the physiological action of exalgine as follows:

First.—As exalgine is an aromatic derivative, it has no marked toxic properties, and is capable of influencing the sensory or motor nervous systems, and of affecting the respiratory and circulatory organs. In poisonous doses, like other poisons of its class, its principal action is on the red blood corpuscle, diminishing the energy of gaseous interchange into the blood.

Second.—Exalgine produces death in doses of 7 grains for every two pounds of body weight of the animal.

Third.—In lethal doses convulsions are produced, and death is rapidly produced by asphyxia.

Fourth.—In poisonous but not fatal doses of 3 grains for every two pounds of body weight, the temperature is reduced rapidly for several successive hours.

Fifth.—In a healthy man, doses of from 4 to 6 grains produced no effect beyond slight vertigo and ringing in the ears.

Sixth.—The primary action of exalgine is on sensibility; its action on thermo-genesis is secondary.

As to the clinical application of exalgine, Dr. Gaudineau formulates his conclusions as follows:

First.—Exalgine, given in doses of from 3 to 6 grains, if the subject is non-febrile, is ordinarily without effect.

Second.—Doses of 4 to 6 or 12 grains modify considerably the pain experienced by a patient suffering from neuralgia or any painful affection.

Third.—Exalgine is poisonous when administered in doses equivalent to 7 grains for every two pounds of body weight, so that in ordinary therapeutic doses it may be stated to be absolutely inoffensive, and that this new remedy is less dangerous than aconitine, digitaline, and all the alkaloids frequently given to patients.

Fourth.—The therapeutic dose varies from 4 to 12 grains administered in the twenty-four hours.

Fifth.—In these doses exalgine has never produced any other trouble other than slight vertigo and ringing in the ears.

Sixth.—Exalgine is especially valuable, from the fact that it does not irritate the stomach, and that the doses required are small.

The analgesic effects of exalgine are especially evident in the treatment of neuralgia, and, to a less reliable degree, in the treatment of pains of a rheumatic character. Finally, while exalgine is but little soluble in cold water, it readily dissolves in solutions containing diluted alcohol, though it is easier to administer in powder or in some solution flavored with some aromatic.—*Therap. Gaz.*

SUBCUTANEOUS EMPLOYMENT OF ANTIPYRIN.

Dr. L. Bach has made two hundred and seven injections of antipyrin in one hundred different cases of various diseases, principally of a neuralgic character, calling for a remedy which would relieve pain, and has published his conclusions in his graduation thesis at the University of Wurzburg, 1889.

Of these cases, there were cured twenty cases of muscular pain, nineteen cases of neuralgia, and eighteen cases of articular pain, making in all forty-seven. Fourteen cases of muscular pain, ten cases of neuralgia, and two cases of pain in the articulations, making in all twenty-six, are stated to have received temporary relief. No result whatever was noted in eleven cases of muscular pain, four of neuralgia, and one of articular pain. These cases may be again subdivided into the following groups: Nine cases of sciatica were cured, one case unaffected; five cases of lumbago was cured, one was uninfluenced; two cases of hemicrania were cured, three obtained temporary relief; three cases of trigeminal neuralgia were cured, three obtained temporary relief, and one was uninfluenced; seven cases of articular rheumatism were cured, two obtained temporary relief, and one was unaffected. The author further states that in