

quote the above, states that this report will be discussed during December.

PYRODINE: A NEW ANTIPYRETIC

This new antipyretic has been extensively tried by Dr. Dreschfeld, of Manchester, on healthy persons and on patients suffering from various diseases, whilst Dr. Wild has investigated its physiological action in the laboratory of Owens College. It has been found to be a remedial agent of greater power than antipyrin, antifebrin, phenacetin, or any other of these chemical bodies, which have been so much recommended of late for the reduction of temperature in pyrexial cases. Pyrodine is one of the most numerous derivatives of coal tar, and, as its active ingredient, contains acetyl-phenyl-hydrozin, $C_6H_5N_2H_2$ (H_2H_2O). It is a white crystalline powder, very sparingly soluble in cold water, and almost tasteless. Doses of eight or twelve grains on consecutive days produced no ill effects on healthy persons. Similar doses of from eight to twelve grains markedly lowered the temperature in from two to four hours, in cases of pneumonia, scarlet fever, typhus and typhoid fever; but occasionally toxic effects are produced, and this seems to be more particularly the case in typhoid fever and in cases of rheumatism. These toxic effects are those observed in cases of aniline poisoning, and depend on the action of the drug on the blood, producing a hæmoglobinæmia, or even a destruction of the blood discs. The skin becomes jaundiced and aniline can be detected in the urine. Pyrodine should never be given in larger doses than twelve grains, and only once in eighteen or twenty-four hours, and it is not safe to continue its use for more than a few days. If either of these precautions is neglected, serious or even fatal symptoms may be rapidly induced. As the use of antipyrin and other products for lowering temperature and relieving pain is becoming extensive, we have thought it especially incumbent on us to warn the profession against the dangerous character of this latest addition to our therapeutic resources, and never to exhibit it except with the greatest caution and in the most critical cases of disease.

M. DUPAIN, in a thesis on religious delirium, remarks that different religious ideas of delirious form may have such close relations to each other as to merit the name of religious delirium. These relations are sometimes so marked, and the different delirious religious ideas so intimately connected, that they may be suitably designated as systematized religious delirium. M. Dupain, however, does not consider that religious mania can be regarded as a pathological entity. Religious delirium may be met with in the various forms of mental disease. In idiocy and imbecility delirious religious ideas, when they exist, are not very vivid. In mental debility and insanity religious delirium is childish, foolish, and sometimes incoherent. In chronic delirium, which develops systematically, and in mental degeneration, religious delirium is not uncommon; it is principally in these two forms of madness that systematized religious delirium develops. In mental degeneration religious delirium appears in sudden attacks and disappears as quickly; in chronic delirium its appearance is preceded by a period of psychical disturbance, and its particular form (persecution or ambition) is determined by the character of this period; it ends in insanity. The form of religious delirium, whether it is systematized or not, is polymorphic at the outset; its progress is more irregular than in chronic delirium, and it is frequently cured. In epilepsy religious delirium also appears suddenly, and often takes the form of mania; there is complete amnesia; ictus is invariably observed. In hysteria religious delirium sometimes replaces the attacks of convulsions, and assumes a mystical form. In intermittent circular or double lunacy, religious delirium presents much the same aspect as in mental degeneration. In mania and melancholia it has only a transitory significance, corresponding with the vesania of which mania and melancholia are the simple elements. In toxic lunacy religious delirium is intimately connected with and under the dependence of the delirious toxic attacks. Speaking generally it may be said that religious delirium takes the character of the particular morbid element, which has been determined by the period of vesania in which the religious mania participates.