

backache, but Doctor McWalter has not observed this in small doses. Its action is very much like that of cascara sagrada, but probably more active and less griping. It seems almost an ideal laxative in pregnancy. It should not be given in tablet form unless mixed with chocolate, but it may be given in powder or in cachets.

Phenolphthalein is particularly useful in intestinal toxemia, because obviously what is required is a mild antiseptic, capable of being taken for a considerable period without toxic or cumulative results, and yet free from those irritating effects on the mucous membrane of the intestine which render most purgatives harmful in such cases. In chronic muco-membranous colitis the use of intestinal antiseptics is generally disappointing, but phenolphthalein will be found, in doses of half a grain thrice daily, eminently satisfactory in preventing enterospasm, easing pain, checking the excessive secretion of mucus, ameliorating the neurasthenia, and generally improving the patient's condition. Like all drugs of its kind, phenolphthalein has become much dearer since the war, but the dose being small, the actual cost is negligible.

CONTROL OF DIPHTHERIA CARRIERS.

Long clinical experience showed William Ewart (*British Medical Journal*, December 11, 1915) the curative value of a coating of oil applied to the nasopharyngeal mucous membrane in diphtheria, influenza, pertussis, tonsillitis, etc. For this purpose jasmine oil was found to be the most satisfactory, since it is free from irritating properties. With the patient reclining and head thrown far back, half a medicine dropper full of the oil should be introduced into the nostrils drop by drop. The position should be retained for a minute after completing the instillation, after which the head should be rotated first to one, then to the other full lateral position. As the head is then raised, the oil slowly runs down the back of the nasopharynx and it may either be swallowed, or may be allowed to spread over into the larynx and trachea. The treatment should be frequently repeated. The local inflammatory condition is promptly relieved and cure of the infection accomplished. It has proved serviceable in ridding diphtheria or influenza carriers of organisms.—*N. Y. Med. Jour.*

GLYCOSURIA IN CHRONIC INTESTINAL STASIS.

Alfred C. Jordan (Reprint from the *Proceedings of the Royal Society of Medicine*, 1915, vol. viii., Electro-Therapeutical Section)