

and leaf, arise together from the root ; the former is naked, terminated by three umbels with small greenish flowers ; the leaf is ternate or quinate, in three divisions, the leaflets are oval and acuminate ; the whole leaf is longer than the flower. The root is officinal ; it is horizontal, creeping, several feet long ; as thick as the little finger ; of a yellowish brown colour externally, having an aromatic odour and a warm sweetish taste. It differs from sarsaparilla in its woody structure and central medulla. In its medicinal properties, it is mildly stimulating and diaphoretic, and is used as a domestic remedy in rheumatism and other chronic diseases. The form of administration is decoction.

From the last edition of the UNITED STATES DISPENSATORY we glean the following information on the same subject :—"False sarsaparilla is a gentle stimulant and diaphoretic, and is thought to exert an alterative influence over the system analogous to that of the root from which it derives its common name. It is used in the same manner and does as well as the genuine sarsaparilla. The root of *aralia racemosa* or *American spikenard*, though not officinal is used for the same purposes as *A. nudicaulis*, which it is said to resemble in medicinal properties. Dr. Peck strongly recommends the root of *aralia hispida*, called in Massachusetts *dwarf elder*, as a diuretic in dropsy. He uses it in the form of decoction, and finds it pleasanter to the taste and more acceptable to the stomach than most other medicines of the same class."—ED. U. C. J.

Correspondence.

NOTICE TO CORRESPONDENTS.

MR. GILBERT'S request has been complied with in a more complete manner than could possibly have been done through the pages of this Journal.

DR. HOLMES (London.) The report alluded to by you was duly received and appreciated, and was made use of in a manner in which it was more efficient than it would have been by publication in the pages of this Journal. We could not have omitted several other documents of a similar nature had yours been published, and to print them all would require greater space than we can afford.

DR. JONES' (Norval) letter has unfortunately been mislaid. The circumstance that it was not addressed either to Editors or Publisher, may perhaps account for this, and must excuse its non-appearance.

DR. KEY'S letter received. The omission was not intentional.

DR. MEWBURN (Stamford) is thanked for his communication. The article accompanying it was received too late for this impression, but shall appear next month. We note his request which shall be complied with.