

**BELLADONNA AND IODIDE OF POTASH.**—M. Aubert states that in certain individuals in whom small doses of the iodide of potash produce violent reaction in the naso-pharyngeal mucosa, that extract of belladonna, in daily doses of 5 centigrammes, continued for a few days, will allow the iodide to be used without untoward symptoms.—*Cronica Med. Quirurgica de Habana.*

**HEMORRHOIDS.**—Duval gives, in the *Centralblatt fuer die gesammte Therapie*, the following formula for an application to hemorrhoids:—

R Unguenti camphorati . . . . . ʒi.  
Pulveris gallarium . . . . . grs. 15.  
Plumbi acetatis . . . . . grs. 15.  
Extracti belladonnæ . . . . . grs. 8.

M.

Sig.—Rub on the hemorrhoids four times a day.

**A REMEDY FOR WHOOPING COUGH.**—Dr. Hammond places reliance on the following:—

R Ammon. bromid. . . . . ʒ i.  
Tr. lobelia . . . . . gtt. xx.  
Tr. stramonii . . . . . gtt. vi.  
Eucal. oil . . . . . gt. vi.  
Syrupi pruni virg. . . . . ʒ i.  
Elise cort. . . . . ʒ is.  
Aque . . . . . ʒ i.

M. Sig.—Ten to twelve drops every four hours.

**ICHTHYOL.**—Dr. Lorenz recommends ichthyol in a variety of cases. In a 30 per cent. solution, it relieves the severe itching of senile prurigo; for pruritus, a weaker solution is used, namely, 10 per cent. As an application to slowly granulating burns and ulcers, he has had excellent results; and internally, in doses of four tablespoonfuls of a 1 per cent. solution in the day, he has relieved the symptoms—vomiting, etc.—of catarrh of the stomach.

It is reported that Dr. A. McLane, Hamilton, lately cured a case of hystero-catalepsy in a male patient by squeezing his testicles. We can easily imagine that a good hard squeeze by a male attendant would have an excellent effect in such cases.

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TORONTO, APRIL, 1886.

### LECTURE ON SYPHILIS.

At the commencement of his second lecture, Mr. Hutchinson discusses the question of secondary and tertiary symptoms. The result of his observations may be given in the following quotation: "Speaking loosely and in a general way, it is still true that visceral affections, gummata, deep ulceration, and periostitis, belong to the tertiary stage. It is only when these facts are brought forward as if they were constant, and sufficient in themselves to form the basis of classification, that we are compelled to make protest."

He then relates a case in which tertiary lesions were present before the healing up of the hard chancre.

Rupia, in Mr. Hutchinson's opinion, belongs to the secondary rather than the tertiary stage. He has seen cases in which it existed in the primary stage.

Between syphilitic lupus and the true lupus vulgaris there is no relationship whatever. There is, however, a syphilitic form of the true lesion in the same way as in psoriasis.

Mr. Hutchinson's views on syphilitic disease of the palm are most instructive, and ought to be noted by those interested in syphilis. We will give the paragraph in full:—

"Perhaps I could not adduce better illustrations of the difference between secondary and tertiary affections of the same parts than by reminding you of what happens in the case of the palm of the hand. In the secondary stage, and simultaneously with the general eruption of the skin, the palm of the hand often suffers from psoriasis. It is always both palms which