

the belief that irritant matter in the alimentary canal is the sole cause of evil. But time forbids me to do more than allude to these things. I will merely add this word of advice. In treatment, consider as carefully what not to do as what to do. To avoid doing harm is as important as to affect positive good.—*Dr. W. B. Cheadle in The Practitioner.*

THE THERAPEUTIC VALUE OF CANNABIS INDICA.

The virtues of cannabis indica are well known to neurologists, and especially to asylum physicians, but the profession generally does not appear to have great confidence in the drug. We are therefore pleased to see a letter in the *British Medical Journal* for July 4th, by Dr. C. W. Suckling, professor of medicine in Queen's College, Birmingham, calling attention to the value of cannabis indica in a variety of morbid conditions. He states that during the last few years he has been accustomed to prescribe it in many affections. In one form of insanity, more common in women than in men, and brought on usually by mental worry, often owing to the illness of a near relative, or by a moral shock, the drug acts almost as a specific. In this affection the patient is depressed and apprehensive, and imagines that animals are after her or that some one is trying to injure her. There are great mental confusion and mental loss, the patient is unable to carry on any conversation, and sometimes is unable to dress herself, the condition being one of acute dementia. The author says that he has notes of several such cases that have been cured with cannabis indica within a fortnight. He usually gives ten minims of the tincture three times a day, combined with iron and strychnine. He prescribes also complete rest and plenty of food. The cannabis indica is an essential factor in the treatment, for without it the rapid recovery does not follow; it seems to remove the mental distress and the restlessness.

Cannabis indica has proved very useful in his hands in the treatment of melancholia and mania. He has also found it of great value in the treatment of chorea when arsenic fails. It may be combined with chloral with advantage in such cases. In migraine the drug is also of great value; a pill containing a quarter of a grain of the extract, with or without the same amount of phosphide of zinc, will often check an attack immediately, and if the pill is given twice a day continuously the severity and frequency of the attacks are often much diminished. The author has met with patients who have been incapacitated for work from the frequency of the attacks, and who have been enabled by the use of cannabis indica to resume their employ-

ment. The drug is also a valuable gastric sedative in cases of ulcer of the stomach and gastrodynia. It may be combined with nitrate of silver, and it increases the efficacy of the latter. It is also a valuable hypnotic.

Dr. Suckling omits an important practical point in connection with the use of cannabis indica. We refer to the difficulty of procuring reliable preparations of the drug. We have reason to believe that this difficulty exists in England as well as in this country. This fact probably accounts in a large measure for the distrust of the drug felt by many physicians. They have found its action so uncertain and irregular that they have abandoned its use altogether.—*Ed. N. Y. Med. Journ.*

THE DIAGNOSIS AND TREATMENT OF INFLAMMATION OF THE APPENDIX.

In a discussion upon this subject before the Massachusetts Medical Society Dr. John Homans said a diagnosis of inflammation of the appendix should be made by any physician up to the ordinary standard of to-day. It is, however, difficult to recognize those cases that would be fatal if left to themselves and those that would recover without surgical aid. Chronic suppuration or hernia may occur after laparotomy for appendicitis, but this should not prevent us from operating. Rational symptoms should guide us in cases requiring an operation, and if possible it is best to wait until an abscess has formed. In cases where the vomiting ceases a day or two after the first onset, the countenance becomes bright, the temperature falls below 100°, and the pulse is about 80, and the abdomen is soft and not tense—a favorable issue with a convalescence, though often tardy and tedious, may be expected. The patients are better off than if they have to go around for a year waiting for an abscess to close and these abdominal abscesses seldom do close—or a ligature to come away, or a hernia to be cured, or with pains from adhesions. On the other hand, a tense abdomen, great mental anxiety, a rising temperature and pulse, with inability to take food and increasing tenderness in the iliac region, especially with a protrusion into the rectum, urge immediate operative interference and removal of the appendix also, if it is easily found. The varieties of appendicitis may be, classically, divided into four: (1) One in which the appendix is perforated, and, perhaps, the cæcum also, and general peritonitis is at once set up. This class of cases is generally fatal with or without operation. (2) Another variety has perforation of the appendix, with limited peritonitis, soon shut off in an abscess of varying size, but generally rather large and forming a well defined tumor, often quite prominent. This class demands operation and drainage, and is generally cured.