

bacteria. It is believed to be impossible that lime-salts are abstracted from the teeth to supply the needs of the growing foetus. More than enough phosphates are ingested to supply the needs of both mother and child; hence the maternal teeth do not suffer from lack of nutrition. During gestation osteophytes are found, showing an excess of lime-salts in the system. The true explanation must be looked for in some change in the oral secretions, which thereby furnish a more favorable soil for the development of the micro-organisms. There is evidence to prove that the acidity of the saliva is increased during pregnancy, probably through changes in the blood, whereby its alkalinity is diminished. The analogy between this and the lithemic condition is striking. Vomiting of pregnancy, while it may to some extent aid, cannot be considered a potent factor in the production of caries. Neglect of the teeth cannot be proved to be more prevalent during pregnancy than at other times, and, therefore, should not be considered among the causes of caries.

THE EFFECT OF THE LOCAL APPLICATION OF GUAIACOL IN THE REDUCTION OF THE TEMPERATURE IN TYPHOID FEVER.—McCormick has written a paper, *Med. News*, on this subject, and in summing up the article, says he is convinced of the following facts:

1. That guaiacol when locally applied is certain to reduce temperature.
2. That with the care that a physician should always use in the administration of drugs, it is absolutely safe.
3. That chills will not occur if the temperature is not reduced below 100° F.
4. That no deleterious effect is produced upon any of the organs by its use.
5. That it is easy to apply, and can be used by any one competent to nurse a typhoid fever case.
6. There are no depressing effects following an intelligent use of the drug.
7. That by continued use the dose can be gradually lessened.
8. That it is far superior to the cold bath; that it can be used by one person; that no appliances are necessary for its use that are not obtainable in every home; that it is much more pleasant to the patient; that it is fully as effective; that

patients are not subjected to the danger of moving, and they offer no resistance to its use.

McCormick has thoroughly tried the bath and cold packs, and knows that they have proved very efficacious in many cases, but with his experience with guaiacol has no desire to return to either of them.

LIGATURE OF THE SPERMATIC CORD IN THE TREATMENT OF HYPERTROPHY OF THE PROSTATE GLAND.—In a paper read before the Philadelphia Academy of Surgery in November, 1894, Ewing Mears held, *Br. Med. Jour.*, that to obliterate the function of the generative apparatus would be a rational method of treatment in ordinary forms of prostatic hypertrophy. Without doubt, he stated, castration would prove effectual in the production of atrophy; but to this operation patients would naturally refuse to submit unless in advanced stages of bladder disease resulting from prostatic obstruction. Ligature of the vas deferens was suggested as an operation which would probably be as efficacious as castration and be more readily acceptable. The author has seen the report of one case in which this operation had been performed with a successful result. The gradual disappearance of the sexual function, the author pointed out, would not be so liable to disturb the mental condition of the patient if the testes were preserved. In every case the patient should be informed of the character of the operation and what is intended to be accomplished by it. The author regards it as the duty of the surgeon to urge very earnestly the performance of any operation which will be efficacious in terminating the horrible sufferings of those suffering from the results of prostatic obstruction.

WHEN TO OPEN THE MASTOID.—In an interesting article in the *Internat. Jour. of Med.*, Dr. Bishop concludes that the mastoid should be opened:

1. When there is an acute inflammation of the bone that resists palliative treatment.
2. When repeated swellings and abscesses occur.
3. When there is bulging of the posterior and superior wall of the meatus with suppuration of the middle ear.
4. When there is a fistula.