

More important, however, to the practitioner, than mere omissions and additions are the changes in strength and dose, in respect of which the whole group has been reduced from a condition of chaos to one of comparative uniformity. All tinctures are now divided into two classes, in one of which the strength has been arranged so that the dose averages from 5 to 15 minims. In the second class the dose varies from half a drachm to a drachm. This involves many important changes in strength among which the following are to be remembered :

- Stronger.—*Tinctura Belladonnæ* (twice previous strength.)
Tinctura Chlorof. et. Morph. Co. (four times in *Morphia.*)
Tinctura Colchici (nearly twice.)
Tinctura Lobeliæ Ætherialis (nearly twice.)
Tinctura Nucis Vomice (twice.)
Tinctura Podophylli (twice.)
Tinctura Quassia (three times.)
 Weaker.—*Ext. Opii Liquidum* (three quarters.)
Tinctura Aconiti (two-fifths.)
Tinctura Strophanthi (one-half.)

A few new lozenges are introduced, and the basis of almost all has been altered; many of them now contain black current paste under the name of fruit basis. The new lozenges introduced are the lozenge of phenol, of eucalyptus gum, of rhatany and of rhatany and cocaine; the lozenge of opium has been omitted.

Among the ointments we notice that the ointment of tartarated antimony is now officially discarded, along with the ointment of sulphurated potash, and the ointment of turpentine. All the ointments containing alkaloids have now a certain amount of oleic acid in their formula to act as a solvent for the alkaloid. In the majority of ointments, paraffin is now used as a basis. Five new ointments are introduced; these are rose water ointment, capsicum ointment, cocaine ointment, mercuric oleate ointment, yellow mercuric oxide ointment and paraffin ointment.

In a large number of the official preparations, although no alterations have been made either in their name or strength, minor alterations have been made in their mode of preparation. To a few only of these have we referred, considering that they interest the pharmacist more than the medical practitioner.

Many much used substances have not been made official, because on enquiry it was found that they were proprietary preparations, made only by foreign firms, and purity tests could be of no service.

Many changes have been made in the official posology. With regard to this portion of the work there will probably be many conflicting opinions. In the preface it is expressly stated that the quantities appended are intended to represent average doses in ordi-