

service, collectors of customs and to State and municipal health officers. The department also shall, as far as it may be able, procure and tabulate statistics relating to marriages, births, deaths, the existence of epidemic diseases and all information relating to climatic and other conditions affecting public health. The department will co-operate with State Boards of Health, the Signal Service, the medical department in army and other branches of the Government and utilize the researches so as to make the department a repository of public sanitary comfort. All rules governing the service are to be framed by the medical officer in charge and are to serve for the instruction of consular officers abroad, and for masters of sailing vessels bound for the United States from foreign ports.

—*Ex.*

ALVARENGA PRIZE OF THE COLLEGE OF PHYSICIANS OF PHILADELPHIA.—The College of Physicians of Philadelphia announces that the next award of the Alvarenga Prize, being the income for one year of the bequest of the late Senor Alvarenga, and amounting to about one hundred and eighty dollars, will be made on July 14, 1892. Essays intended for competition may be upon any subject in medicine, and must be received by the Secretary of the College on or before May 1, 1892. It is a condition of competition that the successful essay or a copy of it shall remain in possession of the College.

In the clinic, for a case of *chronic Bright's disease*, in a woman aged fifty years, in which the prognosis was unfavorable, Prof. DaCosta gave, as palliative treatment: *To control the waste of albumin*, one drop of nitro-glycerin, one per cent. solution, and increased to grt. v, three times daily. *For the anemia*: Ferri sulphas, 3 grains three times daily in pill. The diet to be as nearly as possible of milk, skimmed milk preferable on account of the disturbed state of her digestion. Patient might have green vegetables, fruit, fish, and oysters;

the indication being to guard against nitrogenous foods.—*College and Clinical Record.*

The Hospital and Dispensary abuse question is undoubtedly beginning to engage serious attention in various quarters, both professional and lay. The attending staffs of such institutions have been far too ready to treat patients not entitled to the free attention. When medical schools exist, and especially in the larger cities with several schools, the staffs vie with each other in attracting material. The result is harmful to the public, encouraging regrettable habits of seeking "something for nothing," and the younger professional men particularly are deprived of a very considerable part of their legitimate field for work and bread-earning.

A SAD MISTAKE.—A writer in the *Hospitals Gazette* quotes the following story, said to have been related by Sir Richard Quain, M. D., which perhaps points a moral. He was attending the wife of an old patient, and at one of his visits the husband set him thinking by saying to the doctor, "I greatly appreciate the anxiety you feel for my poor wife, but do not let her see it again, for after you left the room she asked if you were the undertaker." As Dr. Quain rather prided himself on having a good bedside manner, he felt that he was being taken down a peg or two.—*Med. Record.*

COD LIVER OIL AND CREASOTE FOR CONSUMPTION.—Dr. J. Summerbrodt, Professor at the University of Breslau, has recently published his experience in the use of creasote in consumption. He states: "After nine months' employment of creasote, in thousands of cases of consumptive patients, I have reached the conclusion that we can cure with creasote sufferers in the initial stages of lung tuberculosis, and not only the initial stages, but also longer seated and severer forms may be completely and