

show its presence in the urine. It has been found there, however, and it is therefore conceivable that it may irritate the kidneys at times in a pronounced manner. I do not believe, after careful watching, that this will often take place, unless large and frequent doses of the drug be given. It is true that under these circumstances I have recognized a passing albuminuria, which disappeared when the amount of creosote taken by the patient was diminished. I think it is wisdom, in view of such facts, to be on one's guard and to examine the urine carefully every few days, at least, when the patient is taking large amounts of creosote.

Is it a contra-indication to the use of creosote when renal diseases already exist? In reply, I would say that under these circumstances I have given creosote and have observed no evil effects from its use, although it is true I have not been willing to increase the dose beyond six or eight minims in the twenty-four hours. In so doing I believe I have acted prudently and wisely.

In regard to hæmoptysis, is there any reason to believe that the use of creosote occasions hæmoptysis, or makes patients more liable to it? According to Dujardin-Beaumetz, creosote in appreciable doses, while it is eliminated from the body by way of the respiratory organs, congests the bronchial mucous membrane, and thus promotes the occurrence of pulmonary hæmorrhage. According to him, the drug is strongly contra-indicated whenever hæmorrhage actually occurs. Nothing in my experience thus far tends to corroborate this view. It seems to me prudent, however, to recognize the possibility of what Beaumetz affirms, and for this reason to interrupt the use of creosote during the time there is hæmoptysis, or an evidently imminent tendency to it.—B. Robinson, in *N. Y. Med. Record*.

WORDS OF WISDOM TO MEDICAL GRADUATES.—In his able address to the graduates of the Buffalo University Dr. Geo. M. Gould, editor of the *Medical News*, offers many valuable suggestions, which are worthy of being read in full.

To be explicit and detailed, let me counsel a few "don't's."

1. Don't be in a hurry for success.
2. Don't consult or fraternize with quacks of any kind or degree.
3. Don't be afraid of speaking out your denunciation of quackery, regardless of the loss of a few possible patients and the charge of jealousy.
4. Don't support medical journals run in the interests of the advertisers, journals that are muzzled, that are conciliatory to, or non-denunciatory of quackery.
5. Don't sign a single certificate as long as you live, as regards special, proprietary, or secret preparations.

6. Don't write a medical article in which such preparations are praised or even mentioned.

7. Don't accept commissions of presents from druggists, manufacturers, opticians, or surgical-instrument dealers.

8. Don't let any professional allusion to yourself, your opinions, or your work get into the lay newspapers. Don't be a sneak advertiser, a "newspaper doctor."

9. In your own righteous wrath against quacks outside of the profession, don't forget that there are many within the profession, and that they are the most despicable—true wolves in sheep's clothing. I would rather be the "Wizard King of Pain," and buy affidavits of impossible cures at twenty dollars each, than a respectable hypocrite indirectly or secretly hob-nobbing with newspaper reporters and supplying them with "data."

As physicians charged with the health of the present and future, our duty must become clear: the entire witch's Sabbath of 'pathies and 'isms, the morbid cranks, drunk with ignorance and conceit; the sly cunning of advertising schemers, the tricks and frauds of medical parasites to suck the blood of their dupes, the patent medicine disgrace—all these things must be choked out of existence. It is a warfare, not a compromise, we are entering upon. It is not a theory, it is a condition that confronts us.—*Medical News*

SEX AND MUSIC.—Sir J. Creighton-Browne's oration before the Medical Society has been read with interest far beyond the circle to which it was immediately addressed, having penetrated to quarters usually impervious to physiological enlightenment and hygienic remonstrance. No need, therefore, to apologise for returning to it, charged as it is with an educational value which re-discussion will be found to strengthen, certainly not to impair. Even before the difference between the sexes in cerebral structure and function, were so scientifically demonstrable as now, there were practical tests in the sphere of education itself which pointed irresistibly to the conclusion arrived at by the medical orator. Take, for instance, the art of music. There is no room here for the contention that, as compared with the boy, the girl has not had fair play—that opportunities for cultivating the art have in her case been few, in his case many. The reverse is the truth. If there is a branch of education in which girls have been schooled to the neglect of every other, it is precisely that of music. It is among the primary subjects to which she is put, and among the very last she is allowed to leave off. Not one hour a day but many hours out of the twenty-four are consumed by her at the piano, to say nothing of other instruments, while singing lessons are usually given in supplement to these. It might have been thought that if