

lozenges that are sold it is often alleged that they are made from the crystals. These have a bad effect, while the testing of chloral in solution cannot be carried out, since, in determining the chloral, the impurities undergo further decomposition.

As regards the dose, it is not possible to speak of a normal dose. I have already pointed out that ordinarily small doses aggravate the condition in trismus and tetanus. Here I have used as much as eight grammes with a good result. In the case of drunkards, however, I would recommend caution. It is also most advisable not to allow milk to be taken, as was done in the Balham case, since under its use the formation of chloroform goes on rapidly, and may occur in the stomach.

That exceptionally large doses of chloral may be taken by men is proved by the injection of chloral into the veins. An injection of 6.75 grammes of chloral produced in eleven minutes complete anæsthesia, and a sleep which lasted thirteen hours. I merely mention this fact, without entering on a criticism of the treatment.

From what has been adduced, it is evident that the first thing to be ascertained in any unfortunate case is whether the result is due to the chloral or to some other product accompanying it. According to my view all physicians should take especial care to use only pure crystals, or solutions regarding which there is good ground for trusting to the goodness of the material used by the manufacturers. When this is done it will be possible to speak of a sufficient dose, and to weigh equally the advantages and disadvantages of chloral against each other.

In my opinion coincident circumstances probably co-operated in the Balham case; they should not be overlooked, and, considering the novelty of the remedy, and the employment of a preparation recently brought into use for the first time, should not be charged as a subject of blame to the physician.—*London Lancet*.

T. R. Fraser, M.D., F.R.C.P.Ed., has been appointed Professor of Materia Medica in the University of Edinburgh, vice Sir Robert Christison, Bart., M.D., resigned.

USEFUL PRESCRIPTIONS.

BY J. LEWIS SMITH, M.D.

DYSPEPSIA.—The following treatment has, in my practice, probably relieved nine-tenths of those cases of dyspepsia which were not due to organic disease:

R. Bismuthi subcarbonatis... ʒij
Pepsini (vel Lactopepitini) ʒiiss. Misce.

Divide in crustulas, No. xij. Signe:—Take one wafer before each meal, and twenty drops of the following in wine or water after each meal.

R. Tincturæ nucis vomicæ,
Acidi muriatic; (dilut)... aa ʒj. Misce.

In cases attended by constipation and eructation of gas, the following will be found useful:

R. Pulveris carbon. ligni,
Magnes. calcinat..... aa ʒi
Pulveris rhei..... ʒij. ad ʒss. Misce.

S. Take half a teaspoonful to one teaspoonful in simple syrup or any convenient vehicle, three times daily. Of course, whatever the medicines employed, proper directions should be given in regard to the diet of dyspeptics.

The habitual constipation of infants is a common and troublesome complaint. It can sometimes be remedied when a wet nurse is employed, by the change from one nurse to another, and often by giving a little oatmeal one or more times daily. It is better to employ enemata of water, or water with sweet oil and molasses, for habitual use, than to employ the mildest preparations of those purgative drugs which are in ordinary use, and which produce catharsis by their stimulating or irritating effect upon the surface of the intestines, since the irritation which they cause is apt to impair the function of the gastro-intestinal mucous membrane; or the intestines may become so accustomed to them that it will be found necessary to increase the dose in order to obtain the desired result.

The treatment which I am at present employing for a decidedly strumous child, aged four years, in the New York Foundling Asylum, indicates the manner in which, in my opinion, the habitual constipation of young children can be best overcome. When I commenced attending in this institution in May of the present