vice in the case of severe sprains, and mild injuries would probably do as well under rest alone. An elastic bandage, the depressed parts being covered with a layer of cotton so as to prevent too great pressure over the prominence, and thereby causing sloughs, will meet the first indication, and by its use in procuring rest it will meet the second indication. This bandage acts like massage in promoting absorption and and also secures immobility of the joint. It is of equal service in sprains complicated with rupture of points of insertion, whereas massage would be productive of harm in cases in which splinters of bone were torn away. The practice of relieving the mind of the patient by giving him something to do in the way of applying bad-smelling liniments is a pernicious one, and really shows an unprofessional or unscientific attendant.

ANTIPYRINE IN DIABETES.—This very useful drug seems to have found another field for operation in diabetes. It appears that a number of observers, chiefly French, have been experimenting with it on this disease. Thus (*Bull. de l'Acad. de Méd.*) it is stated that with a daily dose of 30 to 45 grains, and without the observance of a special diet, Panas found great improvement in all symptoms. Sée says that a cure, in some cases temporary, in others permanent, is effected by antipyrine in those patients in whom the amount of sugar in the urine does not exceed from 2½ to 3 ounces to the quart. Under its use all the characteristic symptoms disappear, provided that the diet be rich in nitrogenous elements and poor in hydrocarbons, though the latter need not be entirely excluded. No effects can be hoped for in advanced cases, or in those in which the excretion of sugar exceeds the limits just stated. Robin, on the other hand, considers the drug but suspensory in its action, and warns of the too free use of it. Large doses he found interfered with the appetite and caused albuminuria if persisted in. Patients should never be allowed to use it habitually, and it should at once be stopped with the appearance of the first signs of poisoning.

COLON-FLUSHING IN TYPHOID FEVER.—Dr. Buchan, in the *Med. Rec.* presents the following conclusions in regard to the above:

1. That from one to three quarts of cold water can be easily and safely passed into the colon which will rapidly lower a high temperature.

2. That I believe, in some of the cases, the water passed the ileo-colic valve, entering the small gut.

3. That tympanitic distension will always disappear with passing away of the water so injected.

4. That putrefactive fermentation of the bowel-contents is prevented by such use of water.

5. That toxic substances are more rapidly absorded by the cæcum than by any other portion of the intestinal canal, and that, by a judicious and careful washing with antiseptic water, we can prevent the absorption of such toxic substances, and prevent and modify general systemic poisoning.

BROMOFORM IN WHOOPING-COUGH.—According to Dr. Stepp (*Deutsche Med. Wochen.*), whooping-cough is readily cured by bromoform. In a large number of cases no evil results have been noted, and its action upon the disease has proved most satisfactory. He orders it in very frequent doses, children taking from five to twenty drops during the twenty-four hours. It is very sparingly soluble in water, and should therefore be prescribed in alcohol. The Dr. believes that under this treatment the bronchial catarrh and lobular pneumonia do not generally occur. He believes also in the prophylactic power of the drug, other inmates of the family being protected from the disease by taking it in ordinary doses. Dr. Stepp believes that bromoform is either excreted unaltered by the lungs or is separated into its elements, and that the free bromine is excreted by the lungs. In this way an effect on the bacilli of whooping-cough could be easily supposed to result.

DEATH FROM THE ENTRANCE OF AIR INTO THE CIRCULATION.—Dr. Hane (*Ibid.*) has formulated the following conclusions from experiments made upon 70 dogs.

1. Death never occurs from the entrance of air into the ordinary veins of the body unless the quantity be enormous—from one to several pints, a quantity which cannot enter unless deliberately sent in by a surgeon.

2. The cases on record have been due to other causes than air and have not been proved.

3. The tendency of the vessel to collapse and the leakage of blood prevent any entrance of air,