

remarkable and satisfactory results were obtained, but as the subject is yet under investigation, its consideration will be deferred until a fuller report can be made.

Finally, this method was employed with the most excellent results in the ozena following ulcerations and necrotic processes in the nasal cavities. Often was it noted that after the removal of some offending sequestrum of bone, the difficulty of cleansing the passages and the acute pain still continued. This was caused by the unhealthy and foul-smelling purulent discharges, which drying very quickly into broad, thick black scabs, could not be removed by the ordinary "douching" process, so that the dressing forceps, or some other forcible means, had to be employed to effect their removal. These scabs obstructed the free flow of the liquids and gave rise to the pain. The regular and continual employment of the gelatin bougies, medicated with carbolic acid or iodoform, and the plugging up of both anterior and posterior nares so as to prevent the access of air, so hindered and interfered with the formation of these scabs that a speedy healing of the parts was the result:—*Clinical Notes.*

TREATMENT OF LUPUS.

Dr. Scwimmer reports that after trial of the various methods of treatment for lupus, he has found none which, taken singly, can be pronounced suited to every case. Severe local measures are capable in certain cases of doing more harm than good. Among the most useful means of treatment must be reckoned pyrogallic acid. Applied in the form of a ten or fifteen per cent ointment, three or four times daily, it soon transforms the morbid growth into a pulpy, grayish substance. Although the cicatrix looks clean after this treatment, it almost always contains tubercles, which in many cases renew the disease. To prevent this result he hit upon mercurial plaster, which he employed in conjunction with the former. The pyrogallic acid is seldom able to produce total destruction of lupus tissue alone, and it is well known that the gray plaster has little influence upon the lupoid infiltration by itself; but by using the acid to destroy the lupus tissue, and the plaster afterwards to promote absorption, they act very efficiently. In a series of very malignant cases he pursued the following course with success:

For several days after admission the diseased surfaces were kept completely covered with vaseline smeared on cloths, in order to facilitate the removal of all secondary morbid products, such as scabs, etc. A ten per cent pyrogallic ointment is then applied over the same area, and renewed two or three times in the twenty-four hours. This dressing was employed from four to six days, or, in cases where the cutaneous tissues were insensitive, from six to seven days. On its removal, vaseline was again applied for one day, after which the entire

suppurating surface was covered with mercurial plaster. Healing began in from ten days to a fortnight in most localities, but isolated nodes and tubercles could still be detected in the cicatrized integument. Pyrogallic acid should once more be applied for three or four days, causing renewed suppuration of the recently-healed infiltrations, while those more firmly skinned over remained unaffected. When treatment was repeated, so much pain was experienced in many cases on the second day, that mercurial plaster had to be substituted for the ointment; but if this was not the case, the latter was left on for two days longer. The gray plaster was allowed to remain—being changed once daily if the suppuration was trifling, twice or thrice if it was more profuse—until cicatrization was complete, which sometimes required four weeks. If the complaint was peculiarly indolent and obstinate the same process was gone over for the third time, but treatment never extended further than this.

An accurate and unprejudiced comparison of the results obtained in this way, with those following other methods, has proved decidedly favorable to the former. A speedier and much better resolution of the more advanced and wide-spreading growths was found to occur under the combined pyrogallic and mercurial treatment than could have been brought about by the united agencies of scarification and the thermo-cautery.

In conclusion, he states that, "in order to make our estimate more precise, and to obviate any misconception which might cause the means I have recommended to be regarded in the light of a lupus panacea, I present the following summary of the objects which they may be reasonably expected to accomplish:

1. The severest and most extensive forms of lupus—those hitherto most difficult and frequently impossible to manage—may be often sensibly ameliorated by these simple and comparatively painful procedures.

2. The application of mercurial plaster immediately after several days' use of pyrogallic acid, is able to bring about complete absorption of the tubercles and infiltrated cells at some points, while at others it is remarkably effective in arresting the morbid growth, and forming complete and smooth cicatrices, results which are not obtained by the use of either remedy alone. The combined treatment may be employed two or three times in succession without inconvenient consequences.

3. The more circumscribed forms of lupus are less amenable to this method than the diffuse serpiginous, and ulcerated varieties,—perhaps for the reason that in the latter the corium affords a less congenial breeding-place for the morbid cells. Yet sometimes in these same cases, better results are obtained by a previous deep scarification of the affected parts, although scarification alone will prove entirely ineffectual.

4. The duration of treatment is shorter than by other methods, not exceeding three or four months in the worst cases.