

tumors on the posterior surface of the uterus near the fundus, not as large as a pea.

Third, the tri-manual examination is conducted either by the vagina or by the rectum and vagina, assisted with the hand above. The peculiarity of this method is an *artificial descensus uteri*. The uterus is grasped with a pair of bullet forceps and drawn downward until the cervix is seen at the vaginal outlet, and while an assistant holds it in this position, the gynæcologist uses his hands bi-manually. To obviate the employment of an assistant, Dr. Kelly has invented an instrument, which he calls the corrugated tenaculum, flattened and roughened so that it can be readily held between the last phalanges of the third and fourth fingers and the ball of the thumb, while the index finger of the same hand, assisted by the abdominal hand above, is engaged in making a vaginal or rectal examination.

By one or the other of these methods, the uterus, broad ligaments and ovaries and tubes are within reach of a most thorough and searching examination, revealing at once the smallest abnormalities.

SIMPLE REMEDY FOR PALPITATION.—Dr. Gingeot (*Rev. Gen. et de Chir. et de Ther.*) recommends (*Jour. Am. Med. Assoc.*) as a valuable remedy for palpitation—one that has proved serviceable to him—the application of cold to the precordial region. Attention must be paid to the method of applying cold. The simplest plan of all is to apply a wet sponge over the heart in the morning before dressing. At night, when in bed, the patient or an assistant may put a cold compress over the heart, well covered with dry bandages, to retain moisture, and prevent any wetting of the clothing. When this compress is warm, the patient will remove it, and will probably fall asleep. There are objections to the ice-bag, one being the condensation of insensible perspiration upon the surface of the skin. The ether-spray is a simple and convenient method of refrigeration. With proper instruction as to necessary precaution in the use of ether, the patient can apply cold in this way at any hour of the day or night. Palpitation of purely nervous origin seldom fails to be greatly benefited by the application of cold; and a certain success often follows its use in cases of palpitation due to organic dis-

eases. Equalizing the heart's action will often prevent an increase in its size. It is also useful in aneurism and passive dilation.

TURPENTINE IN ENTERIC FEVER.—Prof. H. C. Wood (*Med. News*) fears that the value of turpentine in typhoid fever is in danger of being overlooked at the present day. There are two stages of the disease in which it is particularly useful. The first stage is at the end of the second week, when the tongue becomes dry and glazed and the abdomen very distinctly tympanitic, with or without diarrhoea. The second period is during convalescence, when perpetually recurring diarrhoea indicates failure of some of the ulcers to heal. Professor Wood states that it is his routine practice to give turpentine in every case of typhoid fever, beginning about the twelfth or fifteenth day; and he believes that if its use were habitual, there should be fewer cases of intestinal hæmorrhage or other severe symptoms due to local lesion. It may be given with glycerin and a volatile oil made into an emulsion, in doses of ten to fifteen drops every two hours during the day time, the patient being allowed to rest at night. The following formula is used by him:

R.—Ol. carophylli, gtt. vj.
 Ol. terebinthinae, ʒ jss.
 Glycerinae, ʒ ss.
 Mucil. acaciae, ʒ ss.
 Syrupi, ʒ iij.
 Aquae, āā ad. ʒ iij.
 M. Sig.—Deserts spoonful as directed.

CHRYSAROBIN IN HÆMORRHOIDS.—A Paris correspondent of the *Pharm. Rec.* states (*Coll. and Clin. Rec.*) that extraordinary success has been reported with chrysarobin in the treatment of hæmorrhoids. For the external variety he prescribes the following ointment to be applied several times daily after a washing in a 1 to 50 solution of phenic acid, or a 1 to 100 solution of creolin: Chrysarobin, 80 ctgr.; vaselin, 25 gm.; for external use. For internal use the formula is as follows: Chrysarobin, 8 ctgr.; iodoform, 2 ctgr.; cacao butter, 2 gm.; make one suppository. In three or four days, pain and hæmorrhage are said to disappear, and it rarely happens that the most obstinate cases are not cured within two or three months.