

the use of "Pepto-Mangan, Gude" in six to eight weeks they were restored to the normal or increased beyond it. He concludes the paper with the following :

"In most cases the Pepto-Mangan (Gude) had no constipating effect. Of the eight cases of which accurate notes were kept, all showed a marked improvement both in the increase in the amount of hæmoglobin as well as increase in the number of red blood corpuscles. The average increase of the hæmoglobin was 2.2 per cent and of the red blood corpuscles 1,258,000."

Dr. Hugo Summa, of St. Louis, in an article in the *New York Medical Journal*, reports having treated thirty-four cases with Pepto-Mangan, Gude, partly cases of chlorosis and partly cases of secondary anæmia, occurring chiefly after subacute malarial and typhoid fever. Two cases of chlorosis and four of secondary anæmia he gives in abstract, in all of whom there was great improvement or complete recovery.

He says: "In conclusion I should like to state that similar good results were obtained in the remaining twenty-eight cases. It is especially worth while mentioning that no bad after-effects could be detected. In this connection I call special attention to the absence of constipation that could be traced back to the use of this preparation. The dose varied from a teaspoonful to a tablespoonful three times a day an hour after meals, either in sherry or milk, according to the individual case, especially according to the condition of the digestive organs."

Dr. Chas. O'Donovan, of Baltimore, Md., in *The Medical News* of November 27th ult., and in April, 1889, speaks very favorably of the use of manganese in certain cases of dysmenorrhœa. The articles are too long for even brief abstract, yet it is a well-known fact that, as a rule, dysmenorrhœa, when not due to structural lesions of the uterus, or displacements, stenosis, etc., can with almost unerring certainty be traced to be dependent on an altered, depraved or deficient condition of the blood.

In my own hands and limited experience I can look back during a little over a year past with an extreme degree of satisfaction to the following:

CASE I.—*Gastric Ulcer, Acute.* Female, æt. 53 years, school teacher, previous health good for years, was suddenly attacked with profuse gastric hæmorrhage, which persisted at frequent intervals for three consecutive days. The loss of blood was alarming, and the amount and her general appearance justified the most unfavorable prognosis on the part of my associates in the case, who gave up the case as hopeless. The hæmorrhage subsiding, alimentation by the rectum solely and Pepto-Mangan by the same channel for two entire weeks was resorted to, nothing per os except the least possible amount of ice water or crushed ice to relieve thirst; then a cautious return to gastric alimentation and Pepto-Mangan by the stomach for four weeks more, when she returned to her duties. No other medicines were used other than an occasional hypodermic of morphia during the first week to allay restlessness and procure sleep.