Editorial Summary.

AN ENGLISH SUBSTITUTE FOR GOA POWDER.—Mr. Balmanno Squire (*Pharm. Jour. & Trans.*) alludes to the late discussion on Goa powder, and to the fact that the remedy was proved to be identical with various other powders, used for similar purposes, in different parts of the world, as the ringworm powder used in Cochin China and in the Malay peninsula, under the name of *Poh di Bahia;* the powder used in Bahia under the name of *Araroba*, and the ringworm remedy used in India under the name of *Goa powder.* All these were proved to be one and the same thing, and it remained for Professor Attfield to prove that the active principle of this was *Chrysophanic acid*, and that this agent constituted some 85 per cent. of the powders examined. The acid is contained in rhubarb, dock root and many vegetable substances, and it is evident that goa powder is of vegetable origin, being apparently the medulla or pith of the stem and branches of a tree, probably a *Cæsalpinia*, or of some nearly allied genus. Granting the efficacy of goa powder as a remedy for ringworm and other skin diseases of a parasitic character, Mr. Squire proposes an ointment of chrysophanic acid to be employed as a substitute. Some care in manipulation is required in order to present the acid in this form. Advantage must be taken of the fact that the acid is soluble in hot benzole. Two drachms of acid and ounce of lard are, by means of a water bath, dissolved in the smallest possible quantity of benzol. The solution is then rapidly cooled, being rapidly stirred in order to ensure the equal distribution of the acid as the ointment sets. Mr. Squire thinks that this preparation might prove efficacious in non-parasitic skin diseases as well as those for which it has already shown itself to be a valuable remedy. In psoriasis and lupus it has proved a serviceable application, and these are amongst the most inveterate of the diseases of the skin. Should a demand arise for chrysophanic acid there can be no doubt but the present high price would give way, and that if the manufacture extended the product would ultimately become cheap. Since the publication of Mr. Squire's paper there have appeared in the journal above referred to two other communications relating to the subject. One of these is from Dr. H. R. Crocker, of University College Hospital, London, who says that Mr. Gerrard, the dispenser to the hospital, has, during the last nine months, prepared large quantities of chrysophanic acid ointment, and that it has been experimented with on an extensive scale in the hospital. The results of these experiments are in the hands of the editor of the *Lancet*, but will shortly be published, "when it will be seen that the ointment is by no means deserving of unqualified praise." Mr. Ger-