were six in number—four incisors, one canine, and one small molar. These teeth were neither very white nor very strong, but formed an excellent substitute for those lost. Van Helmont relates a precisely similar case occurring at the same age.

Poisoning by Carbolic Acid.—The Medical Times and Gazette, of November 27, 1875, contains a report of a case of poisoning in which the patient, a woman forty years of age, swallowed nearly a teacupful, or about four ounces, of crude carbolic acid. Twenty minutes afterward the stomach was thoroughly washed out, and a pint of olive-oil thrown into it. There was prostration, but under stimulants, milk, ice, etc., the patient gradually recovered, and was discharged from the hospital about a month after the accident.

International Medical Congress.—During the American Centennial Celebration it is intended to hold an International Medical Congress, to be formally opened at noon on Monday, the fourth day of September, 1876.

The Honorary Secretary for the Dominion of Canada, Dr. A. H. David, of Montreal, requests Secretaries of Medical Societies to communicate with him, so that invitations may be sent to all to appoint delegates.

Body Snatching.—With reference to a paragraph under the above heading, copied from the Globe of Dec. 3rd., in our last issue, we are pleased to learn from Dr. Dupuis that our young friends at Kingston have no occasion to risk life or liberty to procure the material for dissection, inasmuch as they always have had, and have now, more than they can well dispose of. As the Doctor says the "first intimation they had of any such occurrence in or about their city was the paragraph in our columns," we fear the Globe is not read in Kingston as it should be. Having copied the item from so reliable a source we never presumed to doubt its truth, but it only affords another illustration of the old adage, "put not your trust in Princes," even of the press.

A PLAN FOR CHECKING DANGEROUS MIS-TAKES IN PRESCRIPTIONS.—At Vienna, and we believe throughout Austria, the druggists' shops annually undergo an official inspection. One of the pharmæcutists visited was much commended by the Commissioners for a plan which he has introduced into his shop for avoiding mistakes in the dispensing of such drugs as are poisonous in small doses. This consists in indicating on the label of the jar or bottle the weight of the maximum pharmacopæal dose. In this way the dispenser is immediately warned if he meets with a prescription in which the maximum dose is exceeded, and he can take the necessary measures to assure himself against error. Orders have been given to introduce this system immediately into the shops of all the Vienna druggists.

Occlusion of the Superior Vena Cava.—At a meeting of the Pathological Society of London (Dec. 7th, 1875) Dr. Habershon brought forward an instance of occlusion of the superior vena cava in a man of thirty-seven, who had enjoyed good health as a coal-heaver until seven years before his death, when swelling and great congestion of the face and upper extremities came on with much distension of the superficial abdominal veins. He was partially relieved, but sank from ascites, paracentesis affording only partial relief. After death it was found that the superior vena cava was obliterated; its position in the right auricle was marked by white puckering of the endocardium.

The innominate vein ended in a cul-de-sac. Large communicating veins passed in front of the pericardium into the mammary veins; others into the smaller and greater azygos veins; and by these means the blood was carried downwards into the inferior vena cava and reached the heart. There was much fibrous thickening around the aorta, and in the position of the superior vena cava. The pulmonary valves were imperfect, being represented by two segments and the rudiments of a third on a somewhat lower level. The man had never had syphilis. There was no cyanosis whatever or other symptom before the thirtieth year.