

soda: that such, however, was not the true explanation, was demonstrated by the fact of Dr. Garrod having found that the ash of an acid blood gave an alkaline reaction as strongly marked as that obtained from healthy blood, and that the amount of the soluble salts was not diminished.

Urea.—This substance was often found in the blood in cholera, and in many cases it might have existed in quantities larger than in health, and yet escaped detection. In general, it was found to exist in increased quantities, and the amount of this increase depended much on the state of the patient at the time the blood was obtained, or in what stage of the disease the individual died; thus, in the stage of collapse it was found in but small amount, when partial reaction had taken place, and had continued for a time, then it was increased, and in the consecutive febrile stage its excess became very great. Dr. Garrod explained this by supposing that in the intense collapsed stage, the formation of urea became suspended, as well as its excretion by the kidneys; thus accounting for its being then but little augmented: but when reaction, febrile or otherwise, takes place, then the formation of this principle ensues, and often the excretory power of the kidneys is not regained; and hence its accumulation in the blood.

From the results obtained recently, together with those arrived at in the former epidemic, Dr. Garrod drew the following conclusions—viz.

1st. That in cholera the physical characters of the blood are altered, and that its tendency is to become thicker, far-likelier, and less coagulable.

2ndly. That the proportion of water is much diminished.

3rdly. That the specific gravity of the serum is very high, due to the increase of the solid portion of the serum, and especially to the albumen; that this fluid also tends to become less alkaline in its reaction.

4thly. That in cholera the saline constituents of the blood are not only not decreased in amount, but sometimes exist even in increased proportions, and that the diminution of the alkaline reaction is not due to the loss of salts, but to the diminished excretion of acid matters which are constantly being formed in the system.

5thly. That urea usually exists in increased quantities in cholera blood, but that the amount differs considerably in the different stages of the disease, being but small in quantity in the intense stage of collapse, increasing during reaction, and in excess when consecutive febrile symptoms occur.

Dr. Garrod then stated, that although our knowledge of the changes which occur in the blood during cholera were confessedly very imperfect, yet that sufficient was known on the subject to enable us to distinguish this disease from any other, and to solve the following problem:—"Given, a specimen of human blood to determine whether it was derived from a cholera patient."

Dr. Garrod then showed the bearings of these researches on the pathology of the disease, and alluded to some points in the treatment.—*Lon. Med. Gaz.*

Iodide of Potassium in Syphilitic Rheumatism.—The large number of sailors admitted with this complaint, renders it easy to test remedies with it; and this experience shows that the above medicine, in moderate doses (gr. x. ter die), acts as a specific upon it, often relieving the nocturnal pains in the bones in a few days, and favoring the disappearance of nodes. Several such cures I have noted, and from one to two dozen must occur annually in the hospital.—*American Journal of Medical Sciences*, January 1849.

Anæsthesia from the local Application of Chloroform.—Mr. Higginson brought forward the case of a lady, aged 25 years, in labor with her first child: the perineum had long

been on the stretch by the head, which was tumified by the pressure: the pain was great with each uterine contraction, but was referred entirely to the perineum, no pain being apparently felt from the uterine contraction itself.

About half a drachm of chloroform was poured upon a handkerchief in the ordinary manner, but instead of being applied to the mouth, it was held in almost immediate contact with the perineum. The pain immediately ceased, though the uterine contractions continued in full force; and the first intimation the patient had of the progress of the labor, was hearing the child cry. Her mind was not at all affected, nor was intellectual consciousness in any degree diminished.

He had observed the same thing, though in a less degree, when the chloroform had been applied to the sacrum in another case.

He had also applied this agent to the os uteri of a patient suffering from very severe dysmenorrhœa, by means of a sponge placed in a curved glass speculum, which was introduced into the vagina. The pain almost immediately abated, and on its return, after some hours, the patient re-applied it herself with similar benefit.

Dr. Watson mentioned some cases confirmatory of its good effects when locally applied. He had painted it over a swelled testicle, with speedy relief to the pain, and had applied it along the course of the spine with a similar result in a case of acute spinal tenderness, which had not been relieved by other treatment. He had also applied it to the surface of a large mammary abscess prior to opening it, which was afterwards done without suffering to the patient; and also to the vulva of a woman before cauterising the orifice of the urethra. It had relieved the cramp and collapse in a case of English cholera when laid upon the epigastrium, and had abated the pain almost immediately when painted round the edge of a surface to which potassa fusa had been applied for the purpose of forming an issue.—*Lon. Med. Gaz.*

SURGERY.

Treatment of Gonorrhœa, etc., by Vinum Colchici.—Dr. Ficinüs, of Dresden, confirms the opinion formed by Eisenmann, of the value of vinum colchici in gonorrhœa. He gives from twenty-five to thirty drops three times a day, combined with Tinct. Opii, enjoining at the same time a low diet, warm bath, &c. These means he has found attended with unprecedented success in the treatment of gonorrhœa and other inflammatory discharges from the urethra in males, and from the vagina and uterus in females. The details of ten cases are given in illustration.—*Casper's Wochenschrift*, Aug. 26, 1848.

On Constitutional Syphilis.—By Mr. G. L. Cooper, of the Bloomsbury Dispensary.—Syphilis, in its secondary forms, or constitutionally considered, is the result of, or consequent upon, the absorption of a morbid poison into the circulation, reappearing in certain symptoms and parts, according to the stage of the disease. Its frequency every practical surgeon must admit, but the cause remains an undecided question. According to the opinions of some writers of indisputable reputation, its frequency is, in the majority, after the treatment of primary syphilis by a mercurial course; others, again, deny this point, on the principle of a non-eradication of the virus by an omission of that mineral. Now, according to my own experience, I most decidedly lean towards the latter, feeling persuaded that mercury is very requisite to accomplish a permanent cure of the true Hunterian chancre. Most surgeons are aware that ulcers of every character which may appear on the penis, or on any other part of the body, will oftentimes heal of their own accord, without any treatment whatever; but it is another thing to suppose the disease has been removed from the system; in numerous instances, both in private and public practice, the merits of these two methods of treatment have