

all chronic uterine affections, the practitioner will find a sheet anchor in quinine and the various preparations of iron.

Irregular and painful Menstruation.—I have great faith in sulphur given regularly every night either alone or in combination with borax or bicarbonate of soda, and ipecacuanha.

Sulphur ʒj; pulv. boracis ʒj; pulv. ipecac. ʒss. M. B. One to two scruples to be taken every night in milk.
Simpson's Strain.—Contrary to the views entertained by Professor Simpson, that when the uterine sound cannot freely pass the os internum, it is morbidly contracted, I believe that this contraction is its normal state except during menstruation or parturition, and that its relaxation, like that of the os externum, is usually indicative of inflammation.

GRN-SHOT AND OTHER WOUNDS OF THE CHEST.—Dr. B. Howard, Surg. U. S. A., remarks, that the most formidable symptoms attending injuries of the lung are hæmorrhage, dyspnoea and suppuration, and that the custom of leaving the wound open tends to keep up all of them. His mode of treatment is, after removing all foreign accessible bodies, to pare the edges of the wound if from a bullet, in order to convert it into an elliptical incised one, and to dissect away all the injured parts down to the ribs, then to bring the edges together with metallic sutures, deeply inserted, and not more than a quarter of an inch apart, carefully to dry the surface and give the wound a free coating of collodion; then to fasten more securely, he places strips of lint, wet in the same fluid, crosswise over it, and secures the whole with bands of sticking plaster. Should there be undue heat of the parts afterwards he keeps it subdued by means of cold affusion. If suppuration occur internally, the trocar is introduced in some other place to draw it off.

The results by such treatment are remarkable; the dyspnoea is speedily removed, and the patient often falls into a quiet slumber in an hour afterwards.

He removes the sutures in about five days.

The American Medical Times informs us that the surgeon general, to give this plan a fair trial, has ordered that at the next engagement of the army of the Potomac, a hospital shall be organized under the charge of Dr. Howard, for the sole purpose of treating gun-shot wounds of the chest by this "sealing process." The results of his experience will be of great interest to the profession.

TINCTURE OF BLACK COBALT IN IRRITABLE UTERUS, &c.—The tincture of cimicifuga, in doses of thirty minims three or four times in twenty-four hours, has proved a most valuable nervine and sedative in many cases of pseudo-rheumatism and obscure nervous pains.

We are disposed to admit the correctness of the observations of the American physicians, who allege that it has a peculiar action on the uterus. In the irritable condition of that organ, often observed in patients for some time after menstruation has ceased, or irregular when about to cease, and marked by pain more or less periodical in the lumbar region, cimicifuga affords rapid relief. In neuralgic pains, often met with in such patients in other localities, it is equally beneficial. Females at the period of life we are speaking of, frequently suffer from a distressing pain in the upper part of the head, recurring with greater severity at night. These cases are very satisfactorily met by this remedy.

Pains in the mamma also, whether referable to sterner disturbance or to pregnancy, are relieved by the cimicifuga very speedily. In lumbago, it is almost a specific, as noticed by Dr. Simpson.

A great advantage of the tincture of the cimicifuga is, that it is not only rather pleasant to the taste, but very agreeable to the stomach, rather improving the appetite than otherwise. Larger doses than thirty minims, however, as a drachm for instance, will in most persons produce an unpleasant tightness and dull pain across the forehead.—*London Lancet.*

NEW AMERICAN PUBLICATIONS.—It is announced that Dr. Hodge, so many years Professor of Obstetrics in the University of Pennsylvania, has in press a new work on obstetrics. It is to be a quarto volume, illustrated with very many lithographic plates prepared from original photographic pictures, together with numerous wood cuts. New editions of well known books are also announced as ready or soon to be issued. Amongst these we notice Dalton's Physiology, Carson's Synopsis of Materia Medica, Parrish's Pharmacy, Ellis' Formulary, and a new reprint of Wharton Jones' Ophthalmic Medicine and Surgery.—*Cincin. Lancet.*

Last year some important investigations were made by the Royal Medical and Chirurgical Society on the relative merits of the plans of Dr. Marshall Hall and Dr. E. Silvester for restoring suspended animation. The result was decidedly in favour of Dr. Silvester's method, which in principle is now adopted by the Royal Humane Society, whose present rules we here subjoin.

ROYAL HUMANE SOCIETY'S

INSTRUCTIONS FOR RESTORING THE APPARENTLY DEAD FROM DROWNING OR OTHER SUFFOCATION, OR NARCOTIC POISONING.

Send immediately for medical assistance, blankets, and dry clothing, but proceed to treat the patient *instantly*, according as much fresh air as possible.

The points to be aimed at are first and immediately, the restoration of breathing; and secondly, after breathing is restored, the promotion of warmth and circulation.

The efforts to restore life must be persevered in until the arrival of medical assistance, or until the pulse and breathing have ceased for at least an hour.

TREATMENT TO RESTORE NATURAL BREATHING.

RULE 1.—*To maintain a free entrance of air into the wind-pipe.*—Cleanse the mouth and nostrils; open the mouth; draw forward the Patient's tongue, and keep it forward; an elastic band over the tongue and under the chin will answer this purpose. Remove all tight clothing from about the neck and chest.

RULE 2.—*To adjust the Patient's position.*—Place the Patient on his back on a flat surface, inclined a little from the feet upwards; raise and support the head and shoulders on a small firm cushion or folded article of dress, placed under the shoulder-blades.

RULE 3.—*To imitate the movements of breathing.*—Grasp the Patient's arms just above the elbows, and draw the arms gently and steadily upwards until they meet above the head, (this is for the purpose of drawing air into the lungs); and keep the arms in that position for two seconds. Then turn down the Patient's arms, and press them gently—and firmly—for two seconds against the sides of the chest (this is with the object of pressing air out of the lungs). Pressure on the breast-bone will aid this).

Repeat these measures alternately, deliberately, and perseveringly, fifteen times in a minute, until a spontaneous effort to breathe is perceived; immediately upon which, cease to imitate the movements of breathing, and proceed to induce circulation and warmth (as below).

Should a warm bath be procurable, the body may be placed in it up to the neck, continuing to imitate the movements of breathing. Raise the body in twenty seconds in a sitting position, and dash cold water against the chest and face, and pass ammonia under the nose. The Patient should not be kept in the warm bath longer than five or six minutes.

RULE 4.—*Thoracic Inspiration.*—During the employment of the above method, excite the nostrils with snuff or smelling salts, or tickle the throat with a feather. Rub the chest and face briskly, and dash cold and hot water alternately on them.