

or cliquism, and we challenge any to state or prove the contrary. Therefore, let each get his medical friends interested in, and see that they all subscribe for it. If you think we take a wrong view of any thing, let us hear your ideas, and if you can suggest any improvement in the *News* write and tell us.

WE hope our subscribers throughout the Maritime Provinces will, for the future, make more use of our journal. It is desirable and advantageous to make it a medium for the exchange of opinions on various doubtful points, and to afford information on the methods of treatment of different diseases. A column for queries and answers, in which subscribers could ask and receive suggestions and hints on the many obscure points in practice, and the treatment of obstinate cases, would be a valuable addition to the *News*. More lengthy communications, in the form of correspondence, involving points of interest and discussions on medical legislation, hygiene, and numerous other subjects, will also be gladly received.

Selections.

THE FAVORABLE TIME FOR IMPREGNATION, AND THE VITALITY OF THE SPERMATOZOA.

Prof. Bosse (*Archiv. Obstet. Gyn.*) has made some interesting studies on these points, about which considerable difference of opinion have prevailed among authorities.

First, as to the most favorable time for impregnation. His first series of observations were with women who became pregnant for the first time immediately after marriage, and wives of sailors where the date of intercourse could be definitely established followed by periods of long absence.

There were twenty-seven such cases, in all of which, except one, the date of confinement made it probable that impregnation occurred during the four days immediately following menstruation. In the exceptional case, intercourse took place seven days before menstruation, and not again for a month. There are two alternatives, either that the

confinement was tardy, as it did not occur until the 285th day, or that as the author has shown is possible, the spermatozoa retained their vitality in the vagina until after the menstruation, and impregnation occurred then.

His second series of observations is of cases of artificial impregnation. He reports eleven cases, of which nine were successful. In one the successful injection was made the day before the menstruation occurred. In the remaining eight, after several unsuccessful attempts at other periods, the successful injection was made in five cases in the twenty-four hours following the cessation of the catamenia; in two, on the second day; and in one, on the third day.

His third series of experiments was made to determine the length of time during which the spermatozoa retained their vitality in the vagina. His methods which should be studied in the original were apparently conducted with the most scrupulous care, and the results he arrived at were as follows:

1. Of eight cases where the semen was deposited in the vagina before the menstruation and examined for afterwards, in four no spermatozoa were found; in three they were found alive; in one dead.

2. Of twelve cases where the semen was deposited after the menstrual period, in four no spermatozoa were found; in eight they were found living at from three to seventeen days subsequently. These investigations justify the author in concluding that the favorable time for impregnation is immediately after the catamenia, that the spermatozoa may retain their vitality for at least seventeen days in the vagina, and even through a menstrual period, and that cases of prolonged gestation may be explained by the fact that fecundation may have taken place a number of days after the last cohabitation.

While there is a great liability to error in investigating so delicate a subject as this, yet these observations seem to have been very carefully made, and are a valuable contribution to the subject.—*Med. and Surg. Reporter.*

THE TREATMENT OF SMALL CYSTIC TUMORS BY MEANS OF INJECTIONS OF CHLORIDE OF ZINC.—This method which was recommended some time ago by Landerer has been used with success by Schilling. A one-tenth per cent solution was employed, of which 0.2 to