

Neuroleprides.—(1.) Symmetry of the spots. (2.) Close relationship with the circulation. (3.) Associate and consecutive phenomena of sensitive nerve trunks. (4.) The neurotic, and more especially the angio-neurotic origin of the affection. The neurosyphilides is made out more clearly than the neuroleprides.

A New Treatment for Tinea Tonsurans.—M. Vidal (*Gazette Hebdomadaire de Med. et de Chirurgie*, July 26, '89) advocates one which has for its object the destruction of the trichophite by microbicides and the prevention of its reproduction by depriving it of its oxygen, for, as is well known, this is an aerobic organism. The technique is as follows: (1.) Application of lotion of spt. turpentine to the scalp without previous epilation. (2.) Friction with tr. iod., which should at each sitting be applied only to a limited surface of the head. This should be repeated two or three times for each spot, until it has been applied to the whole scalp. (3.) Daily inunction of the scalp at intervals with vaseline. (4.) Covering the head with a rubber cap, which should fit as closely as possible to the head. It is claimed by this method epilation is avoided and duration of disease shortened.

"Where in the Dermatological Practice of to-day is the Application of Paquelin's Cautery Unavoidable?" Under this head Unna (*Monatschrift f. Prak. Dermat.*, Band II, No. 9) shows the advantages derived from the cautery. It is especially useful in the following dermatoses: In chronic eczema ani which resists other treatment. Eczema scrote et vulvæ, leucoplakia oris, angioma oris. His mode of application is thus: Local general anæsthesia is produced and with a broad Paquelin's burner slowly cauterizes the affected parts, so that were the proper remedies not applied immediately a burn of the second degree would result. Before the anæsthetic is over apply a 5 per cent. sol. of borax with or without cocaine, carron oil, to which a 2 per cent. carbolic acid is added, or resorcin solution.

Keratoid Eczema of Hands.—Unna recommends for this that the disease be covered with small cotton compresses wet in 2 per cent. sol. of resorcin and hand bound up in a water-tight bandage at night, after washing. During the day zinc or zinc and mercury salve-stick frequently applied.

In all text books on dermatology, especial care is taken to warn against the use of water in skin diseases. Lassar, of Berlin, strikes boldly out, and says that it does no harm, but rather good, and recommends as a preliminary treatment washing with tepid water.

IODIDE OF POTASSIUM IN PSORIASIS.

Gatteling treated experimentally twenty-two cases of psoriasis with full doses of potassium iodide. The results are subjoined. Highest dose per day, 850 grs.; the same patient taking in all in the course of treatment 115 ounces. Average dose 150 to 300 grs. a day. In five patients it was necessary, on account of distressing iodic symptoms, to discontinue use of drug. In several the disease remained stationary and uninfluenced after a certain point had been reached. In five cases complete recovery ensued. Iodic acne was noted in many cases; in one purpura, in another œdema of the legs, in another rheumatic pains in the limbs. Albuminuria was not observed, nor any serious heart symptoms. Inoculations of lupus on rabbits have been made of late.

In an able and instructive article (*Medical Chronicle*, London, Dec., 1889,) H. G. Brooke, of Manchester, discourses on accidents arising from the suppression of eczematous eruptions. His conclusions are worthy of note. The popular idea that it is wrong to "drive in the disease," in some cases is more correct and not to be treated so slightly and laughed at, as most text books and dermatologists would have. The connection of chronic eczema (of long duration) and certain inflammatory outbreaks in gouty and rheumatic people in the joints, lungs, sometimes in the stomach