

the Shankhill districts. I found her much exhausted by a continuous drain of blood proceeding from the gums, nose, bowels, vagina and bladder. She was profusely covered with purple maculæ on the chest, arms, legs and abdomen. Her diet had consisted for months exclusively of bread and tea, alternated with rice, with little milk, potatoes being scarce and dear, and not having any one to cook them. I advised a complete change of diet, and prescribed the usual mixture. When I called to see her at the expiry of a week, she opened the door herself, quite recovered, all bleeding having ceased ere the mixture was finished. As a later example, I may give the case of Sarah Flanagan, aged 12, an inmate of the St. Patrick Industrial School, Belfast, whom I visited on May 8th, 1878, suffering from bleeding from the nose and gums, her body being dotted freely with the characteristic purple spots. In her case, two drachms of the salt, with thirty minims of the tincture of iron, effected a cure, every trace of the disease having disappeared within a week. Her diet was of course looked after.

*Menorrhagia.*—Miss L., a school teacher, aged 38, wan and feeble, very tall and delicate, consulted me for a discharge of blood, which had continued, with short intervals, after a menstrual period several months previous. She suffered from severe pain in the back, from palpitation, and the other constitutional symptoms consequent on a continuous drain. She had tried various remedies prescribed by other medical men without effect. I advised relaxation from her duties for a time, and the chlorate and iron mixture. I saw her some time afterwards; her color began to improve, the discharge diminished, and finally disappeared. The mixture was renewed, and taken occasionally as a preventive.

*Hæmorrhage from the womb.*—Mrs. McS., mother of five children, called my attention to a profuse discharge of blood, which had recurred a fortnight after her previous confinement. On examination with the speculum, I discovered abrasion of the os, from which the blood flowed. She was treated topically by the application of strong perchloride of iron and by the internal use of the mixture. The case was rather tedious, but she always spoke of the sustaining power of the mixture, and the sinking feeling which occurred when the dose was intermitted. She recovered in about a fortnight.

*Hæmatemesis: Hæmoptysis.*—There yet remain two highly important lesions for consideration, in the treatment of which, when they can be traced to the hæmorrhagic diathesis, this remedy has invariably proved beneficial, especially as its administration need not contraindicate the use of more energetic hæmostatics, such as ergot of rye, ergotin, given hypodermically or otherwise, ice, acetate of lead, tannic or gallic acid, etc., if given at sufficient intervals. In cases of hæmatemesis due to malignant disease of the stomach, liver or spleen, and in those cases of hæmoptysis caused by hyper-

trophy of the right ventricle, in pulmonary apoplexy due to a peculiar condition of the parenchyma, or from hæmorrhage caused by the breaking down of a tubercular deposit, and the laceration of an artery passing through the deposit, it is not to be expected that a constitutional remedy should be solely depended on; but when a state of pulmonary plethora exists, evidenced by an effusion of blood from the mucous membrane, in the absence of pulmonary disorganization, and in those cases where a sudden cessation of an accustomed discharge, menstrual or otherwise, causes congestion of the mucous membrane of the stomach or of the bronchial tubes, and vicarious discharge from either, then the liberal administration of the chlorate of potash and iron will be found as salutary and satisfactory as in the other phases of the disease.

Having thus presented a few typical cases, behind which, had opportunity permitted, I might have marshaled a host of equally striking examples, I have but to remark that, while it is the duty and the instinct of the physician, after obtaining satisfactory results from any remedy to seek for and to theorize upon the *modus operandi* of that remedy it is wise, while he remains steadfast and immovable upon the basis of practical experience, to advance with diffidence and reserve the solution which to him appears satisfactory, but which others, equally or better fitted to judge, may not believe to have passed beyond the region of hypothesis, lest, in condemning the superstructure, the foundation itself may suffer in their estimation.—*British Medical Journal*.

## TREATMENT OF SPRAINS.

Mr. R. Dacre Fox, Surgeon to the Manchester Southern Hospital, in a communication to the *British Medical Journal*, Sept. 25, 1880, makes the following interesting observations, on the treatment of sprains:—

The frequency with which sprains occur in general practice, and the somewhat unsatisfactory results of the treatment ordinarily adopted, induce me to bring forward a method that I have used in a great many cases with considerable success. Sprains may be broadly divided into two kinds, mild and severe; the former consisting merely of a temporary over-distension of the parts around a joint, which rest and anodyne applications usually soon cure; the latter involving, as I believe, much more serious pathological results, which the following plan is especially contrived to obviate.

The effects of a severe sprain are, that the fibrous ligaments controlling the movements of the joint and binding the tendons in their grooves become over-stretched, swollen, and softened; the cellular tissue about the ligaments and in the tendon-grooves becomes cedematous; and plastic material is exuded; while, as a consequence of these changes, the tendons are displaced in their