

recommended as a dressing, being anesthetic as well as antiseptic, and is usually efficacious. Various methods of treatment, from cold sitz baths to divulsion and cutting operations, are passed in review. The Sims' method is in a general way regarded as too radical. Two successes are reported from subcutaneous section of the anal sphincter. Medical treatment is of great importance. Much attention must be paid to subjects predisposed to hereditary insanity. Antispasmodic and tonic treatment is usually indicated, while hydrotherapy and arsenical treatment are not to be forgotten.—*Indian Medical Record*.

Puerperal Mastitis.

Brouha (*L'Obstétrique*) gives details of a healthy primipara who during at least the last three weeks of her pregnancy carried out most conscientiously the prophylactic treatment advised by Rubeska for the prevention of mammary abrasions and cracks; twice daily she washed the areola and the nipple with warm water and soap, and followed this with a fomentation of the parts, sometimes with alcohol and sometimes with glycerine. The labor supervened at term; the child presented by the breech, but was delivered without interference; but there was some *post-partum* hemorrhage causing considerable anemia. The same night there was some fever and a feeling of tension in the breasts. The infant was only once put to one breast. A mastitis developed, although no lesion could be discovered in the breasts; recovery took place. The author finds it difficult to explain how microbes reached the gland tissue, as the infant had not been put to the breast when the first signs of mastitis appeared. He considers that some of the microbes which are normally found in the lactiferous ducts had forced their way through the epithelium and reached the lymphatics; he thinks that the mechanical and chemical means employed to prevent the occurrence of abrasions may have weakened the vitality of the epithelium, and so made easy the entrance of the microbes and perhaps also have increased the virulence of these microbes.—*British Medical Journal*.

Diabetic Coma.

M. Sternberg (*Zeit. f. klin. Med.*) after a careful discussion of the work done on the relation of organic fatty acids in the blood to diabetic coma, records the results obtained in a series of experiments in which he administered the various amido-butyric acids to animals. It appears that of the three amido-butyric acids the α and the γ acids were without poisonous or toxic influence, whereas the β -amido-butyric acid, when given in doses of about three grams, caused profound symptoms of