

the long inability to take food in proper quantity and quality. The uterus is a bag of muscle like the heart, and is liable to some of the frailties and accidents which beset all organs constructed as receptive and expulsive cavities. If mere weakness can disturb the rhythmic action of the heart so as to produce palpitations and faintness, it is only according to analogy that a weak uterus should abort, or be flexed, or be unable to contract efficiently when the mature ovum has been expelled. Although no direct observations have been made, Dr. Spender thinks that menorrhagia in early life is often a prelude to post-partum hemorrhage afterwards.

To strengthen the muscular fibre of the uterus he advises that a relatively large quantity of meat (the special food of all muscular organs) should be eaten during gestation. The "positional treatment" should also be resorted to. The patient should lie down for three or four hours daily on a couch, the foot of which is raised a few inches, so as to lighten the arterial column flowing to the uterus, and proportionately to favor the return of venous blood from it. Static pressure being thus relieved, the uterine sinuses are not so liable to be distended, and passive congestion is retarded. Daily muscular exercise in the open air is also of vital consequence in helping the metamorphosis of tissue and the processes of excretion. As a special restorative medicine he has greatest confidence in the muriated tincture of iron, to be taken especially during the latter months of pregnancy. Where a tendency to post-partum hemorrhage has appeared, too frequent pregnancies must be guarded against in order to allow the uterus time to recuperate. Dr. Spender does not think that chloroform predisposes to post-partum hemorrhage. He regards the obstetric belt worn during the last two or three months of pregnancy as valuable in promoting tonicity of the distended uterus.—*Mich. Med. News.*

TWENTY-FIVE CASES OF SPLENOTOMY.—[We are indebted to Professor A. BARKAN, M.D., for the following translation from a paper on Laparosplenotomy, recently published by Professor Czerny.—Ed. P. M. & C. JOURNAL.]

Professor Czerny, who succeeded the late Simon in the Chair of Surgery at the University of Heidelberg, and may be considered as one of the foremost of young German surgeons, has recently published a monograph on laparosplenotomy, which contains the history of two cases operated on by himself, and some interesting remarks regarding the operation itself. Of twenty-five cases on record, six recovered (Zaccarelli, Ferrerius, Pean (2), Martin, Czerny). Speaking of the condition of the patients, whose state of health was shown for a long period after the successfully performed operations, Czerny remarks: "These cases again prove the well-known fact that man is able to live

without a spleen, without his functions undergoing an essential disturbance. The changes in the constitution of the blood are of such trifling nature, and soon pass away so completely, that they may be considered simply as caused by the operative proceeding. The passing swelling of the lymph glands does not seem either to be a constant sequel of excision of the spleen, nor is there a constant anomaly to be found as regards the digestion of the patients. Neither bread and butter nor potatoes agree with my patient, whilst to the second patient of Pean, meat is distasteful. His first patient, as well as Marin's case had normal digestion. If, then, the spleen possesses the great significance in the Pancreatic digestion, and Schiff supposes, it is replaced through supplemental organs, in a way similar to that in which the excluded stomacheal digestion is supplanted in the living dog. A striking feature is the greatly excited nervous condition of these patients. As to the benefit conferred by the operation, there seems to be no doubt that in these four cases the trouble and dangers caused by the moveable or enlarged and painful spleen, have been lastingly removed.—*Pacific Med. & Surg. Journal.*

TREATMENT OF SEVERE BED-SORES.—Dr. Dyce Duckworth (*Archiv. Dermatology*) communicated to the Am. Derm. Ass. meeting of 1877, a short paper on this subject. He recommends that, in addition to the use of the water-bed, the patient should lie with the buttocks and sacrum constantly upon poultices. These should be made of linseed, and if there be much discharge or fœtor, the cataplasma carbonis should be used. They should be made of pure linseed and frequently changed. They must be large and secured in position by a binding sheet secured over the abdomen by safety-pins. The balsam of Peru should be added if there is deep excavation and sloughing.—*Am. Med. Bi-Weekly*

A CHEAP DISINFECTANT AND DEODORIZER.—Dissolve a drachm of lead nitrate in a pailful, and a drachm of common salt in a jugful of soft water and mix the two solutions. Soft water is essential, on account of preventing the formation of an insoluble carbonate of lime and lead. Dip rags into the solution, and hang them in the offensive room, or pour some of the mixture upon excrements, or down the privies or sinks. This is of ordinary strength, but the solution may be made stronger if desired. If carb. lead and lime form, pour off the clear liquid and use none of the sediment.

The Russian plague has been investigated by Prof. Hirsh. He says that the epidemic at Wetlyanka was really one of true plague. The mortality in Wetlyanka was about 80 per cent. It was suspected that the disease originated with the war in Asia.

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