

at frequent intervals dissolved in water or soda-water. If this alkaline treatment be commenced early, occasionally the progress of the comatose symptoms can be arrested.

It is advisable in these cases of commencing coma to give brandy and small doses of digitalis. If the bowels are constipated (and this is usually the case), a mild purgative, or an enema should be given. A rigid diet should be discontinued. Milk and cream are the most useful articles of diet. I have not tried oxygen inhalation, but from reports published it appears to be occasionally of some slight temporary service.

When the patient becomes quite comatose, transfusion of alkaline fluids occasionally succeeds in causing him to regain consciousness temporarily, and if the patient has not seen his friends for some time, then transfusion may be worth performing. But often transfusion only produces a slight improvement in the pulse, and the benefit is only temporary at the best. In nearly every case recorded the patient has soon relapsed into coma.—*Medical Chronicle*.

A CLINICAL REPORT ON GUDE'S PEPTO-MANGAN.

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There may still be some doubt whether manganese is a normal constant constituent of the human blood or of any of the tissues of the body. It may not have been positively determined whether iron, when given in an inorganic compound or in pure metallic form, is absorbed by the mucous membrane of the stomach or intestinal canal, or whether it accomplishes its curative work by some occult process of stimulation of that membrane, by virtue of which it takes up with greater readiness the nutritive portions of food substances which are presented to it at the same time; or whether it plays a chemical role in changing the contents of the alimentary canal, so that what eventually passes into the circulation is more fitted to maintain high standards of nutrition or will prove less deleterious to the processes of life.

Even when we have combinations which, whether obtained synthetically or analytically, resemble the forms in which this metal is found in the blood, our assurance is by no means perfect that they can pass the portals of the circulation, the absorbent organs of the alimentary tract, without great risk of change from their original forms, in their contact with the substances and tissues to which they are exposed.