

half from the end to facilitate introduction, which, after due dilatation with sponge or laminaria tents, can be accomplished easily and with the most perfect safety, by any one with a moderate amount of manipulative tact; and in cases where the os uteri and cervical canal are patulous, one of the smaller sized tubes can, without difficulty, be passed without the previous use of tents, and thus the cavity can be mopped ad libitum.

For the treatment of subacute and chronic endometritis, granular and congested conditions of the mucous membrane of the womb, uterine catarrh, and carcinomatous growths above the inner os, where topical treatment is demanded, these little instruments answer an excellent purpose. In post-partum, and other forms of uterine hemorrhage, when solutions of the perchloride of iron are had recourse to, as the dernier ressort, their simultaneous efflux will be rendered certain by using one of the larger sized tubes. I need hardly state that solids can be applied to the uterine cavity with equal facility by the same means.

These little operations may be conveniently managed by placing the patient in the usual obstetrical position, on her left side; a large vaginal speculum may then be passed well up to the os tincæ, and the transit tube, previously warmed and well oiled, slipped through the cervical canal into the uterine cavity. In a few special cases the process may be more readily accomplished by transfixing the anterior lip with a fine tenaculum, and making sufficient traction to straighten the cervix; sometimes instead of an ordinary large, plain speculum the duck-bill instrument of Sims may be more advantageously employed.

POISONING FROM CARBOLIC ACID.

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As we do not often meet with cases of poisoning from carbolic acid, I beg leave to submit the following.

Hugh Burns, a laborer, æt. about 40 years, while under the influence of intoxicating liquor, drank from a tin cup, a solution of carbolic acid, which was sitting on the stove in a drug store, May 7th, 1878. The cup contained a strong solution of acid, about $1\frac{1}{2}$ ozs., to water xii, which had been placed there by the druggist for disinfecting

purposes. After drinking the acid, the unfortunate man replaced the dish on the stove, and taking a flask of liquor from his pocket, he deliberately proceeded to drink the contents. He then made his exit, and walked to the opposite side of the street, where he sat down, and in twenty minutes' time was comatose. The druggist, who was absent when the acid was swallowed, was quickly summoned by the boy left in charge of the store, and he proceeded at once to inject into the man's stomach half a pint of olive oil, by means of a common rubber syringe and gum elastic catheter. I was summoned to attend, and arrived after the oil had been injected. I immediately injected, by the same means previously used, a solution of sulphate of zinc, which, however, did not produce emesis or any indications of such action. The breathing was rapid, probably forty times per minute, and spasmodic. Pulse beat rapidly and feebly at 160 per minute. Face much congested and livid. On examining the fauces I found they were much affected by the acid, as well as the mouth, presenting an appearance not unlike a diphtheritic sore throat. Coma profound. Not the slightest audible articulation. He rapidly grew worse. No signs of vomiting being likely to take place, I proceeded to reverse the syringe, as no stomach pump was at hand, so that I might be able to empty the stomach of its contents. However, it would be of no material benefit, as the injury had all been done long before I reached the patient. He expired before I had the apparatus adjusted, having lived only forty-five minutes after drinking the acid.

Remarks.—Had the druggist been at his post, or any equally qualified person to attend to the business, and administered a strong solution of saccharate of lime, and an emetic at the same time, the chances of a favourable result would have been much better. But, instead of this being the case, we find the druggist absent, and a boy, who knew nothing of the drug business, left in charge. No solution of saccharate of lime was prepared, and not procurable in time to save the man's life. All things considered, the druggist did well, I think, to inject the olive oil. The druggist, moreover, was reprehensible for leaving a strong solution of carbolic acid exposed in so accessible a place. As regards the immediate cause of death, I do not pretend to give a positive opinion.

Carbolic acid is well known to be a powerful