

## TREATMENT OF GONORRHOEA BY INJECTIONS OF SULPHUROUS ACID DILUTED WITH WATER.

For some time I have treated all cases of gonorrhoea with injections of sulphurous acid diluted with water, and as the results in my hands have been very satisfactory, I write in the hope that others may be induced to give this method a trial.

I do not offer any theory on the subject, I simply state the fact that I have now treated sixteen cases of gonorrhoea, using no other medicine, and they all returned to duty in an average of six days. I have not observed a relapse or any bad effect. The majority of the cases were second attacks, but those suffering from primary attacks of the disease recovered equally fast.

When I commenced this method of treatment I used much stronger injections than I do at present. I find sulphurous acid one part to fifteen of water quite strong enough for most cases. The rules of treatment I recommend are: place the patient on low diet, and administer injections of sulphurous acid diluted in water one to fifteen, three times a day, no other treatment being necessary. I find it is necessary for the attendant to give the injections, for if it is done by the patient it is never well done, most of the fluid escaping back outside the nozzle of the syringe. The injection should be kept in the urethra from three to five minutes. If the patient complains of much pain, or if there is a tendency to chordee, it will then be sufficient to administer the injections once or twice in twenty-four hours.

If these instructions are strictly followed the purulent discharge will become scanty at the end of the first day, and on the third it will be replaced by a thin, gleet discharge, which also disappears in a couple of days. While this watery discharge lasts I usually administer only one injection daily. I find that the first injection frequently causes pain, which is not so much complained of afterwards.

I, therefore, in a few cases give the first injection very much diluted—one in twenty, afterwards using one in fifteen. It is necessary to see that the sulphurous acid is fresh and good before it is diluted to the required strength—*W. D. Wilson, M.B., in London Lancet.*

## TO HASTEN THE ACTION OF QUININE.

Dr. Starke, in *Berliner Klin. Wochenschrift*, advises that before swallowing powder or pills of quinine, a weak tartaric acid lemonade be taken. This procedure not only greatly accelerates the solution and absorption of the quinine, rendering its physiological action much more prompt, but also obviates that unpleasant gastric irritation so common after the administration of large doses of this drug.

## THE TREATMENT OF CROUP WITH "HYDRARGYRI SULPHAS FLAVA."

In 1880 Dr. Fordyce Barker, of New York city, published an article in *The American Journal of Obstetrics* on the treatment of croup which was thorough, indeed exhaustive in character, and elicited favorable comment at home and abroad. The chief reliance of Prof. Barker was upon the therapeutic properties in such cases of the turpeth mineral.

His reasoning, to my mind, was so clear, and his success so uniform, indeed, wonderful (for he tells us for twenty years since he began the use of this drug in croup, he has not lost a case), that I was determined to give the agent a fair and impartial trial.

Dr. Barker insists upon the early administration of the drug; indeed, he regards it of the first importance that it should be given in the very incipency of the attack, and in order to meet this early necessity, he advises the families in which he is the medical attendant to keep turpeth mineral powders in three-grain doses always at hand, and to give one at the very beginning of the attack. For twelve years, after the manner of Dr. B., I have been using the turpeth mineral in the treatment of this disease, and I have, since the adoption of this plan, lost no case of croup.

My treatment has been, immediately upon being called to a case, without stopping to interrogate very closely as to whether I have a croup reflex, catarrhal, or true croup, to administer at once a dose of the agent (from two to five grain, according to age) in honey, syrup, or sugar of milk, and if there is no decided emesis within fifteen minutes, to repeat the dose; and I have never known it to fail to vomit at the second dose; almost immediately a satisfactory response is secured by the first administration. The vomiting is usually free, without effort, and without depression. The powder is tasteless, small in bulk, prompt in action, and thorough in effect.

The virtues claimed for it are sedative and revulsive. "It depletes the mucus, which is thrown up; it removes from the larynx, by the forced expiration which it causes, any albuminous or fibrinous exudation which may be there in diffident state, and which, by remaining, may become, subsequently, pseudo membrane; it acts as a powerful revulsive, and thus diminishes the capillary circulation in the trachea and larynx; and thus it becomes a most effective agent in arresting the inflammatory forces."

If the croup persists after removing the causes of reflex action, then, of course, other therapeutic agencies will need to be essayed; but throughout the attack, be it short or long, whenever the breathing becomes suffocative from the accumulation of mucus in trachea of larynx, I give the turpeth mineral in the manner and according to the conditions and plan above designated.—*E. R. Duval in Ark. State Transactions.*