

through the base of the ulcer. This is done in the following manner: After producing either a local anæsthesia, with cocaine, or the primary stage of general anæsthesia, the incisions are made deep enough to go through the layer of dense fibrous tissue underlying the ulcer, and should extend far enough beyond the edges to reach healthy tissue. If there are any large veins in the immediate neighborhood of the ulcer, they should be cut through. The succeeding hæmorrhage, which is often quite profuse, and rather beneficial than otherwise, is easily controlled by pressure with a snugly applied bandage. In rare instances it may be necessary to control the hæmorrhage by a ligature or stitch. A ten per cent. ointment of iodoform and vaselin is then applied, which is allowed to remain for three or four days, and then renewed.

**TINEA TONSURANS.**—Simpson (*Med. Analectic*), has had good success in the treatment of ring worm of scalp and body, as follows:

Cut the hair short and wash the scalp well with tincture of green soap, and apply the following solution with a camel's hair brush:

R.—Hydrag. perchlor. . . . . gr. i.  
Collodii. . . . . ʒ i.—M.

This treatment acts (1) by destroying the fungi. (2) By the corrosive sublimate being conveyed to the root of the hair by the ether of the collodion, and (3) by the film formed by the collodion shutting off the supply of oxygen to the fungi, thus assisting in their destruction.

**WOMAN'S MEDICAL COLLEGE, TORONTO.**—We have received the announcement of Woman's Medical College for the 9th session, 1891-92. It shows that the institution, under the fostering care of a number of zealous workers, is spreading its roots wider and deeper. We wish them all success. Their work so far has been largely, if not entirely, a labor of love.

We note the following changes in the College teaching staff of this vigorous institution: Demonstrator of Anatomy—Dr. S. P. Boyle *Vice* Dr. Alice McLaughlin, resigned; Associate Lecturer in Obstetrics—Dr. H. T. Machell; Lecturer in Theoretical Chemistry—Prof. Shuttleworth; Lecturer in Toxicology—Dr. Graham Chambers; Assistant Demonstrator in Anatomy—Drs. L. A. Davis and Lowe Graham.

**DIURETIN IN DROPSY.**—Dr. R. A. Babcock in the *N. Y. Med. Jour.* gives the following as his conclusion on the use of the above drug in dropsy. He gives as a rule ninety grains in 24 hours or seven and a half grains every 2 hours:

1. Diuretin (Knoll) is a diuretic of great power and promptitude, suitable to all forms of dropsy.
2. Not increasing arterial tension, it is likely to succeed where digitalis, caffeine, and their congeners fail.
3. In cases of cardiac dropsy, with great feebleness of the pulse and arrhythmia, it will strengthen and regulate, rather than depress, the heart's action.
4. It appears to cause no irritation of the stomach or kidneys.
5. It requires to be given to the extent of from ninety to one hundred and twenty grains daily, and preferably in small doses frequently repeated.
6. It is best administered either in solution in warm water or in gelatin-coated pills, since, if exposed to the air in powders, it undergoes change, with precipitation of much of the insoluble theobromine.

The salt is sodio-theobromine-salicylate, consisting of theobromine, with nearly an equal proportion of salicylate of sodium. It is expensive, being listed by McKesson & Robbins at three dollars an ounce.

**GONORRHOEA.**—Dr. Broome, of St. Louis (*Weekly Med. Review*), recommends the following method of treating gonorrhœa. Instead of rendering the urine alkaline he irrigates the urethra and bladder with an acid, using a solution of benzoic acid. Besides bathing the entire penis in hot water several times daily, the patient is subjected to no change of treatment for several days; then the urethra is insufflated with five grains of the pure substance of methyl-violet, which seems to penetrate the urethra walls and destroy the deep-seated micro-organisms. Average time to cure the disease is two weeks.

DR. N. M. GRAY, of Allegheny, Pa., says: I have tried PAPINE in two cases, and with the best effects. Both were cases of children from one to three years old, and both so complicated with cerebral trouble that I feared to use opium or any of its preparations, and yet I wished for an anodyne to control some very marked symptoms.