

With regard to the mode of applying them, some important rules are laid down, among which, is that their application should never be entrusted to the hands of a nurse, but that the physician should himself supervise it; and after observing that large losses of blood are worse borne by the infant than by the adult, and that if syncope be induced its effects are not so transient, he proceeds to remark that the shock consequent upon large losses of blood shews itself not only as above stated, but also, not seldom, by inducing convulsions, even though the disorder for which they were applied depended upon congestion of the brain; and he illustrates this by a case in point, in which he had ordered a child labouring under cerebral congestion with convulsive twitchings to be leeches; the operation was entrusted to its nurse, and while the bleeding was going on, it was attacked by profound coma in which state it rapidly died. In this case the coma and death resulted from the too sudden withdrawal of blood; but the author remarks that had he, or under like circumstances a physician, been present, he would have noticed in time the supervention of the comatose symptoms, and prevented possibly their further development.

Dr. West next passes under review the administration of *mercury*. We do not agree with the author in some of his remarks on the exhibition of this remedy. Thus he observes that "the peculiar influence of mercury is exerted too slowly to control the first rapid advance of some acute diseases such as croup and pneumonia, though in both after previous depletion, and the administration of antimony, mercury often proves more serviceable." Perhaps in England it may be customary to treat all cases of croup by early depletion. Such practice is far from being the case, or always necessary, in this country. We have no hesitation in recording our conviction that not one in twenty cases of croup require depletion in this country, but that the usual treatment by a warm bath, and an emetic followed up by calomel, is in the very large majority of cases all that is required, provided the case be seen in time. After the prostration of the system produced by the warm bath and the emetic, calomel has been found to control the inflammatory action going on in the trachea and to prevent the formation of false membrane. And even in pneumonia, we should feel inclined to adopt the same treatment that we have repeatedly pursued, the use of antimony in nauseating doses, with calomel, a treatment which we have again and again employed, before resorting to depletion, a measure which we have by no means found to be invariably necessary. With us as in England mercury may be administered in large quantities to infants without the induction of its specific effects. We have, however, seen two cases of stomatitis distinctly produced by it. One of these cases was brought to the Montreal General Hospital as an outpatient during one of the periods of our attendance at that Institution; the other occurred in the practice of an esteemed late brother practitioner some years deceased. We have also seen two cases of Noma, both of which had been under treatment in this city, and although the disease was supposed by their parents to have been the effects of mercury, not a grain of it had been given to either. There can be no question that the diminished activity of the absorbent vessels is the cause of this apparent non-production of the constitutional effects of this