

hand, he never found any trace of urea in the muscles under normal circumstances. A fact which if verified, would lead to important conclusions.

Some ingenious observations have been made by Rosenstein,^b well known by his valuable work on Diseases of the Kidneys, for the purpose of throwing light on this subject. It has long been known that when one of the kidneys is either congenitally absent, or has been destroyed by disease, an increase takes place in the bulk of the remaining organ. In so far as any definite opinion can be said to exist on the subject it would seem that the increased bulk of the remaining kidney is regarded by pathologists as depending on an increase in the secreting structure of the kidney. Valentine, who investigated the subject experimentally, came to the conclusion that in animals in whom one kidney had been removed the remaining kidney exhibited the maximum of increase in the convoluted tubes; the pelvis, the straight tubes, and the ureters being also dilated, and an additional amount of blood being present in the kidney.

Paget^c says that when one kidney is destroyed the other kidney enlarges; "more renal cells develop, and discharge, and renew themselves; in other words, the existence of the constituents of the urine in the blood that is carried to every part determines the formation of the appropriate renal organs in the one appropriate part of the body."

It occurred to Rosenstein that, from the condition of the convoluted tubes, which are the true secreting parts of the kidney, in animals from whom one kidney had been removed and who had survived the operation for some time, some information might be derived as to the function of the kidney as regards the production of urea. He found that the increase of the remaining kidney was mainly an increase of weight, and in a less degree an increase of volume, and that there was no increase in the malpighian bodies or in the convoluted tubes. The greater weight of the kidney depends on an increased amount of fluids being present in it—namely, blood, lymph, and urine, and on a thickening of the tissue elements, caused by increased nutrition, but only in a very slight degree on a real increase in the epithelial cells or in the connective tissue. The increased functional activity of the enlarged kidney completely compensates for the loss of the other, both as regards the secretion of the urine and as regards the formation of urea. From these facts Rosenstein draws the deduction that the kidney takes no part in the formation of urea. In one animal he found that the amount of urine and of urea was almost exactly the same before and after the extirpation of one kidney, and that when the second kidney was removed three days after it showed but a very slight increase in bulk and in organic contents. He concludes, accordingly, that no increase of secreting

substance can have taken place in such a short time, and from the fact that both urine and urea were undiminished, that the kidney cannot be the efficient agent in the formation of the latter, so that we return to the view of Prevost and Dumas again, as confirmed by the very latest experiments on the subject.—*Dublin Medecine Journal* Jan. 1873.

EFFECT OF BROMIDE OF POTASSIUM EMPLOYED IN THE FORM OF A LAVEMENT IN CASES OF UNCONTROLLABLE VOMITING OF PREGNANCY.

Dr. Gimbert, after noticing the very variable forms and degrees of vomiting occurring during pregnancy, remarks, that in some women this generally trivial accident becomes a most serious and dangerous symptom, the patient sinking into a state of marasmus, or aborting. A lady in the third month of her second pregnancy was attacked with incessant vomiting, day and night. She complained of severe pain in the stomach, chest and abdomen, violent headache, a sensation of burning along the œsophagus, and intense palpitation of the heart. An extreme thirst and obstinate constipation completed the symptoms.

Enemas of bromide of potassium, as well as of soup, were prescribed. The first day (fifth of the disease) the patient "absorbed" 6 grammes (a drachm and a half), and on the following night was quieter. Next day she absorbed 8 grammes (2 drachms). The vomitings were less frequent and not so painful. The third day she took 10 grammes, and from that time the vomitings were arrested. Dr. Gimbert has several times since administered the bromide of potassium by the rectum, in less severe cases it is true, but always with the same excellent results. He has never restricted the doses, and has always found them admirably borne.—*Bull. de Therap. and Bull. de la Soc. de Médecine de Gand*, Mai, 1862.

[*Hypodermic use of Strychnia.*] By JULIAN J. CHISOLM, M.D., Professor of Operative Surgery, University of Maryland; Surgeon in Charge of the Baltimore Eye and Ear Institute, etc., etc.

Twelve months since I published my experiences with the hypodermic use of strychnia in retinal troubles. Since that period I have used it daily in nervous affections of the eye, with very varied results, at times very striking, again quite negative. In no case has the use of the remedy been followed by any injurious effects, although a few cases were quite susceptible to its toxic influences. I have been surprised to find that in increasing daily the quantity injected under the skin, a much larger amount than that mentioned by the books may be safely administered, with good results. In my early experiences I always commenced with the $\frac{1}{16}$ of a grain, and slowly increased until $\frac{1}{8}$ of a grain was used, which latter amount I was afraid to exceed. Now I usually commence with the $\frac{1}{4}$ of a grain.

The strength of the solution which I use is sulph.

^b Virchow's Archiv. Bd. 55, s. 141.

^c De Functionibus Nervorum Cerebraliū et Nervi Sympathici, p. 148.

Lectures on Surgical Pathology. Ed. by Turner. London. 1863. P. 19.