

first two or three days, and then on each alternate day. As a rule, in acute attacks, five or six treatments will suffice. In long-standing cases the same treatment should be used, alternating with some mild astringent injection used in the same way. The sound should always be used in sub-acute and chronic cases, at intervals of about three days. It is also advisable to give internally, in all cases, a saline laxative, and in the old cases I generally give, in addition, capsules of *bal. copaibae*, m vi; *ol. cubebæ*, m iv, t. i. d., either before or after meals.

The fact of antiseptics should never be lost sight of, as so many are apt to do. It is a well-known fact that boric or boracic acid is a mild and unirritating antiseptic, which, when combined with glycerine as a vehicle, also an antiseptic, renders it a very safe agent to use for this purpose.

One important point is also gained in this plan. We always have the patient practically under control, and can watch the progress made, not being dependent on the say-so of the patient.

RECIPES FOR PREPARATION OF IODOL.

Pharm. Post :

Iodol solution :

R. Iodol,	0.1
Alcohol,	16.0
Glycerine,	34.0

Iodol gauze :

R. Iodol,	} āā 1.0
Resinæ,	
Glycerine,	
Alcohol,	10.0

Collodion with iodol :

R. Iodol,	10.0
Alcohol (94 per cent.)	16.0
Ether,	64.0
Pyroxilini,	4.0
Olei ricini,	6.0

—*Monatshefte f. Prakt. Dermat., Journal Cutaneous and Genito-Urinary Diseases.*

SIGNS OF THE MORIBUND CONDITION.

1. In general, the signs of death that are most trustworthy appeal to the eye.

2. Among these the respiratory function holds the first rank, both in cases of coma and asthenia, more noticeably when the two modes of death are blended.

3. The death by coma represents, in duration, the longest period.

4. The most valuable sign of inevitable dissolution is the up-and-down movement of the

pomum Adami, always provided that it be persistent.

5. Temperature changes deserve recognition, particularly when the curves are sharp, high and continuous, or when they are below the normal.

6. An intermittent pulse is an early sign of death, especially when not due to any disturbed action of the nervous system.

7. Deaths from syncope are too sudden to allow of much observation or study.—*Medical Record.*

HOT WATER IN FRACTURES.

The *Bulletins et Mém. de la Soc. de Chirurgie de Paris*, April 1889, contains a report by M. Chauvel upon Darde's method of treating fractures near the joints with hot water. Impressed with the advantages of elastic compression and massage in traumatic effusions of the blood, Darde believes that it is possible to hasten matters still more, and to simplify them, by using hot water alone. He first tried the treatment in sprains, and he now advises it for fractures. Hot water is employed in local baths, if possible, beginning with water at a temperature of 113° F., and increasing it to 118° or 120°, maintaining it at this temperature for from twenty-five to thirty minutes. Certain patients bear water at a temperature of 122° and even 124°. The baths are repeated once or twice a day. If local baths cannot be employed, dripping compresses of several thicknesses, with the water at a temperature of 118° or 122°, are employed, and they are renewed frequently during half an hour. Prolonged vapor baths have without doubt the same effect.

The immediate phenomena produced are: a very vivid reddening of the skin, rapid disappearance of the pain, and a slight and transient swelling of the part. In about four or five days resolution of the effusion is obtained, and acute pain is no longer produced, except at the seat of fracture. If care is taken to move the joints and the neighboring tendons often enough and with due caution, cure results rapidly. Darde gives an account of a case of fracture of the lower end of the radius, in a man twenty-four years old. After baths at a temperature of 120° F. had been employed for four days, the swelling disappeared, and pain was no longer felt, except at the seat of fracture. Some progressive movements of the fingers and of the wrists, combined with temporary immobilization of the part, resulted in an apparently complete cure in twenty days. It was only, however, after two months that the patient resumed his work.

Chauvel speaks in regard to the efficiency of