

was drawn well to the right, and its anterior surface slightly twisted to the right. A long incision was made, and a putrid foetus extracted. Contractions followed, and the placenta was expelled. The uterine cavity was stuffed with a long strip of iodoform gauze, soaked in a 5 per cent. solution of carbolic acid. Uterine contractions came on on the third day, but ceased when the gauze was removed. An abscess formed in the abdominal wound. The patient ultimately recovered.—*The British Medical Journal*.

HOW LONG SHOULD A CONVALESCENT FROM DIPHTHERIA BE ISOLATED?

In one case the patient was supposed to be well, and made a visit to a relative in Boston nine days from the date of his "getting up." One week after his arrival a child in the family was attacked with diphtheria, and died. An outbreak of diphtheria in a hotel at Nantucket followed the arrival of a person just recovered from diphtheria, and pronounced well by the attending physician. One of these cases, when supposed to be well, carried it to a hotel in town. Three cases of diphtheria in one family closely followed the advent of a nurse who had just come from attendance on a fatal case.

I think that evidence goes to show that poison is retained in the mucous membrane longer than is generally considered to be the case. In lieu of definite knowledge, I have adopted the arbitrary rule of advising quarantine precautions for one week after the patient appears to be perfectly free from disease. This seems to be a fairly safe rule and one that is desirable.—*Boston M. and S. Journ.*

TREATMENT OF CHOREA IN THE PARIS HOSPITALS.

Dr. Baudoin made an extensive inquiry into the treatment of Chorea as carried on in the various hospitals of Paris, and published his results in *Semaine Médicale*, 1891, No. 13.

Germain Sée has obtained the best results in ordinary cases with antipyrine and arsenic. If there existed any rheumatic taint, he combined the antipyrine with the salicylate of soda. In cardiac cases Professor Sée recommends chloral and hydrotherapy, associated with iodide of potassium, and especially iodide of calcium. Sulphur baths are also recommended. Dr. Gilbert Ballet abstains from all medication in the majority of cases, on the ground that the tendency of chorea is toward recovery. He absolutely discards antipyrine. In severe cases, arsenic or Fowler's solution may be given, from six to ten drops daily. The tonics and iron are very beneficial in anæmic cases. In intense cases spraying the vertebral column with ether may be resorted to. As to the

bromides, they are only indicated in cases complicated with psychical troubles. Good hygiene, nourishing food, absence of fatigue, exercise in the open air—these are the best agents to prescribe.

Dr. Déjérine considers special medication useless in children. He advises tonics, along with massage, salt baths, Swedish movement, and, above all, good hygiene.

Dr. Joffroy lays considerable stress on rest and sleep in the mild cases, and gives chloral hydrate, sixteen to twenty-five grains, after each meal to accomplish this. During waking hours all excitement, physical and mental fatigue should be avoided. In severe cases antipyrine is ineffective, and recourse must be had to the moist sheet, used twice daily.

Dr. Albert Robin has had the best success with antipyrine, giving as high as thirty-two grains daily, divided in four equal parts with four grains of the bicarbonate of soda added. After eight to ten days he substitutes the arsenate of soda for the antipyrine.

Dr. Raymond believes that there are only two efficacious remedies—antipyrine and chloral. Acetanilide has been used successfully in a few cases.

Dr. Luys uses, perhaps, the simplest treatment. His agents are "transfert" with rotary mirrors.

Dr. Sevestre gives preference to antipyrine. He begins with sixteen to thirty-two grains daily, and increases to forty-eight to sixty-four daily. At the same time he administers arsenic, either as Fowler's solution, six to twelve drops daily, or the arsenate of soda. It is necessary to avoid all excitement, and, if convenient, to isolate the patient.

Dr. Ollivier advises, in the first place, massage, and is well satisfied with the results obtained. He prescribes iron, arsenic, and hydrotherapy according to the case in question.

Dr. d'Heilly insists upon hygiene tonics and prolonged sleep. In mild cases he prescribes arsenic, iron, bitter tonics and baths. In severe cases he thinks antipyrine and chloral succeed best.

Dr. Legroux has had excellent results with antipyrine, and gives from thirty to sixty grains daily. In those cases associated with hysteria he administers the bromide of potassium, thirty to sixty grains daily, and the cold shower-bath.

Dr. Jules Simon's plan of treatment is as follows: For the first few days the patient should be kept in bed, should be blistered along the spine, and be given aconite or conium; after two weeks the patient may arise, and then the antipyrine treatment is begun, sixteen to eighty grains daily for several weeks. After this, regular exercise, with iron, baths, etc., should be resorted to.

W. C. K.