

EXTRACTS FROM REPORT ON HISTOLOGY AND MICROSCOPY.

TRANSACTIONS OF CALIFORNIA STATE MEDICAL SOCIETY, 1877.

It is an accepted truism that no physician is competent for all the duties of his profession without a practical acquaintance with the microscope and microscopic manipulation: yet it is to be regretted that so few are to be found who are even tolerably expert in such studies. It is not an uncommon thing to find physicians who are well informed in other departments, who imagine that the examination of a pathological specimen may be easily made by a cursory view of a small piece or a drop of the fluid under the microscope, when in reality many hours or days are needed for the preparatory hardening, staining, and mounting, which are requisite for an intelligent judgment. In cases of doubtful pathological structure or diseased function, the only reasonable course left for those who are not sufficiently skilled in manipulation is to refer the examination to others. To facilitate such microscopical examinations, it is often necessary to transmit the specimens by mail. For this purpose Dr. Richardson, author of the "Handbook of Medical Microscopy," advises the use of acetate of potash. A fluid drachm of sediment containing tube-casts, etc., may be poured in a two-drachm vial containing the solid acetate. The latter will absorb the liquid so that it may be transmitted without leakage. For tumours, etc., a small piece, from one-fourth to one-half inch square and one-tenth of an inch thick, should be placed in a couple of drachms of saturated solution, made by pouring one-half an ounce of rain water upon one ounce of dry granulated acetate of potash. After forty-eight hours' soaking, the piece should be drained and wrapped in several folds of india rubber or oiled silk. In this way specimens may be sent by mail without risk of either decomposition or desiccation. As the acetate has no effect on oil globules, this plan enables us to recognize fatty degenerations in cases where specimens in alcohol or glycerine afford negative results. With deposits of acetate of lime or triple phosphates this plan will not answer, and Dr. Richardson advises the addition of twenty to thirty per cent. of carbolic acid to the fluid which contains them.—*Pacific Med. and Surg. Journal.*

THE CONTINUOUS BATH.

Hans Hebra (*Cbl. f. Chir.*, 1878, p. 89; from *Wien. Med. Wochens.*) has within the last fifteen years treated more than five hundred patients with the aid of the continuous bath. With the exception of some slight local irritating influence upon the skin, observed in a few cases, no disagreeable symptoms have been observed. The bath has even been continued during menstruation without disturbance. The treatment has been used,—

1. In burns (56 per cent. mortality). Favorable effect upon all symptoms; the effect in allaying pain is remarkable, Scars usually soft and smooth, and movement in no way hindered.
2. In pemphigus. While no cases of *P. vulgaris* proved fatal, a mortality of 81 per cent. was observed in *P. foliaceus*. In the latter affection the patient's condition was only endurable when in the bath. Relapses were not prevented.
3. In confluent variola. All patients in whom the eruption showed itself profusely were placed in a warm bath when the eruption had reached its height, and with the best results.
4. In gangrenous wounds and ulcers, whether of syphilitic origin or not. Of the latter, gangrenous buboes were most frequently thus treated. (Mortality, 12 per cent.)
5. In phagedænic chancres the result was not less happy. In phlegmon and in fistulous wounds which would not heal in any other way, the continuous bath acted surprisingly well.

SALICYLATE OF SODIUM IN GOUT.—Dr. Bisson writes to the *Année Médicale* for February the account of a case of refractory gout of twelve years' standing in which this remedy was found of great use. The patient suffered from a severe attack every autumn; most of the joints had been affected, and there were numerous chalky concretions which here and there had ulcerated through the skin. No medicine had been of the least avail. Dr. B. gave the salicylate in doses of eighty grains in twenty-four hours, and with the best results.—*Phil. Med. Times.*