

Another point of the utmost importance arises in connection with the diagnosis of smallpox. It is this: In what way can the present prevalence of smallpox be best utilized for the purposes of medical education? An opportunity is now presented to the hospital authority entrusted with the clinical teaching of infectious diseases in London, for the clinical demonstration of smallpox to the senior medical students, medical officers of health, and general practitioners. All patients certified to be suffering from smallpox are removed at present to the Metropolitan Asylums Board's wharf at Rotherhithe. They are detained there a short time, and are then transferred to the hospital ships. There is, therefore, at the wharf ample material ready for demonstration, and the patients are for the most part in the early stages of the disease, when the eruption is particularly suited for the demonstration of the diagnostic points of smallpox. In addition, much may be learned from the cases of mis-diagnosis sent there. Some facilities have been afforded by the Metropolitan Asylums Board to medical officers of health for seeing smallpox at the wharf and at the hospital ships. The systematic clinical teaching of smallpox, however, has not yet been undertaken, although there appears to be no sufficient reason for delay. I feel sure that the Metropolitan Asylums Board will recognize its responsibility and its duty in this matter, and that it will speedily utilize to the fullest extent the smallpox material at its disposal at the wharf and at the hospital ships for the clinical demonstration of that disease to students and practitioners.—*The Lancet*.

THERAPEUTICS OF OREXINE TANNATE.

Dr. Jos. Kuck, of Wiesbaden, speaks very highly of orexine tannate, introduced by Prof. Penzoldt, about ten years ago.

Orexine tannate is a yellowish powder, tasteless and odorless, insoluble in water, freely soluble in acids, and consequently in the gastric juice. No serious or permanent after-effects have ever been recorded, although the drug has been extensively employed.

In doses of 8 gr. orexine produces strong craving for food. All gastric functions are stimulated by the drug, especially the secretion of hydrochloric acid. All cases of diminished gastric secretion are therefore indications for treatment with orexine, but also loss of appetite from any cause, as well as conditions of emaciation and debility. Thus orexine is useful in the convalescence of febrile diseases, in tuberculosis, scrofula and rickets, anemia and chlorosis, neurasthenia and hysteria, nervous dyspep-