

THE ARTERIO-SCLEROTIC CONTRACTED KIDNEY.

Leven (*Duet. med. W'och.*) says that Ziegler first suggested this name, and that he was also among the first to define this disease sharply from other forms of chronic nephritis. The relation of the vascular disease to the renal affection is a fairly constant one. It is not necessary that it should extend to the whole vascular system; indeed, it is mostly limited, and the heart has been pointed out as the organ in which the vascular lesion is almost constantly present. Even more characteristic and hardly ever absent is the marked affection of the arteries of the pia mater. In the author's experience, the spleen has always been involved. The small arteries show marked sclerotic changes. The splenic reticulum is considerably thickened, and the cells exhibit commencing degeneration. It is the picture of a fibrous induration, the cause of which is to be found in the vascular disease. The cardiac hypertrophy, almost limited to the left side of the heart (while the muscle itself shows early degeneration) is no real objection to this view, for the hyperplasia of the left ventricle is due to the increased vascular resistance, and takes place when the heart is as yet well supplied with blood. The author says that the changes in the kidney itself are the typical manifestations of a degeneration brought about by deficient blood-supply. The changes in the arteries in the kidney affect chiefly the intima and the middle coat only slightly. The adventitia is also much thickened. Leven states that the urine has been in all his cases diminished in quantity (without corresponding dropsy). Eye changes are uncommon. The author says that this form of renal disease exists mostly in the case of men without previous evidence of acute nephritis, who present in the course of time slight albuminuria, passing œdema, a diminished quantity of bright urine, hypertrophy of the heart, and slight uræmic symptoms. — *British Medical Journal*.

HYDRASTIS CANADENSIS IN THE VOMITING IN PREGNANCY.—

Dr. P. Federow (*La Semaine médicale*), in four cases of violent vomiting in pregnancy, has obtained excellent results with the administration of the fluid extract of hydrastis canadensis, twenty drops repeated four times a day. The remedy acts by lowering the blood pressure, removing the

uterine congestion, and calming the over-excitability of the vasomotor centres of the gastro-intestinal tube. — *Lancet-Clinic*.

INDUCTION OF ABORTION IN CARDIAC DISEASE.—

Dolérís (*Nouv. Arch. d'Obsté. et de Gynéc.*) performed this operation recently, on a woman aged 25, who had aortic insufficiency and dilatation of the aorta. She was advised never to become pregnant, but did not regard this advice. Her last period ended on November 9th. 1891. The cardiac symptoms grew worse, and uncontrollable vomiting set in. Pregnancy was evident, and on December 31st it was determined to induce abortion. For four days antiseptic sublimate injections were thrown up and iodoform tampons applied. On January 4th a laminaria stem was placed in the cervix. On the 5th a second and larger stem was introduced. On the 6th the ovum was extracted; the amniotic pouch was opened by the curette. The embryo was extracted in two pieces. The uterine wall was carefully scraped in order to detach the decidua vera. After an intrauterine injection a tampon was applied to the vagina. Small pieces of already detached chorion were expelled on the evening of, and the day after, the operation. After about a fortnight's rest, the patient felt quite free from all the bad symptoms caused by the pregnancy. The catamenia reappeared on January 28th. The advantages claimed by Dolérís for his method are: Limitation of flooding (in this case hardly a drop of blood was lost), strict antisepsis, and rapid evacuation of the uterine contents. — *British Medical Journal*.

SALOL IN CYSTITIS.—

Arnold (*Therap. Monatsch.*) relates cases of acute and chronic catarrh of the bladder which have been much benefited by the use of salol in gramme doses in addition to the local treatment. Even tuberculous cystitis has been relieved by it. Arnold observes that salol makes the urine acid, and renders it ultimately almost clear and free from smell; that the drug is well borne, even when administered for some length of time, and that it is a useful adjunct to the treatment, especially when only weak antiseptic solutions can be tolerated by the bladder. — *British Medical Journal*.