

part was swollen, and presented a smooth, shining surface of a deep red colour. By the most careful examination, with the aid of a magnifying glass, I could not discover any point of abrasion or solution of continuity whatever. I advised a simple water dressing, slinging up the penis, so that egorgement from the dependent position of the organ might be relieved, and as perfect rest as possible obtained. He called on the following day somewhat relieved, but in appearance the parts had not improved; the colour was even deeper than on previous examination. A wash of lead and opium was substituted for the water dressing, and the patient advised to keep the recumbent position. On the next day, the third from his first visit to me, and the seventh from the impure connection, he again presented himself. The tumefaction was much the same; the colour had deepened and was now of a violet tinge, and I discovered, as though under a glass, numerous whitish points varying in size from a pin's point to a pin's head, occupying a space a quarter of an inch broad, and one-third in length on either side of the median line on the inferior aspect of the glans. Previous treatment was continued, and I saw my patient daily for three days following, making in all *ten* days from the connection. On the morning of the tenth day I discovered some half a dozen whitish points just underneath the mucous membrane; these were then opened with a fine pointed bistoury, and discharged minute quantities of pus. Under the magnifying glass the little cavities, left after the discharge of the pus, were characteristic of chancreoid ulceration. In brief, all the points, some twenty or thirty in number, finally worked their way to the surface, occupying some three days longer, and they soon coalesced from the extension of the ulcerative process, resulting in a true chancreoid three-fourths of an inch in length by one-third of an inch in breadth, occupying the site of the original white points. The first pustules were visible through the mucous membrane, but evidently deeper than its thickness, on the seventh day after the absorption. The first of these came to the *surface* on the tenth day, but it was not until the thirteenth that all had reached the mucous membrane on their outward march. Applications of the strong nitric acid resulted in a complete recovery in a few days.—*N. Y. Med. Gazette.*

Medicine.

ON THE TREATMENT OF THE ADVANCED STAGE OF CROUP.

By Dr. EBEN, WATSON, M. A., Surgeon to the Glasgow Royal Infirmary.

[The true indication is to relieve the spasm of the glottis or to reduce the œdema of the mucous folds above it, without wounding the trachea,