suture would seem to be the best adapted to their growth. In the event of the presence of the streptococcus pyogenes or staphylococcus pyogenes aureus infectio, such cases should be isolated as far as possible, to prevent the infection of subsequent cases, which almost invariably follows where isolation is not practiced.

Undue constriction of the tissue by ligatures must be avoided, if the tissues are expected to resist bacterial invasion. Such bacteriological examinations as we have just reported teach us the importance of securing an aseptic field of work and technique, as the introduction of a virulent organism under the above circumstances would be productive of great harm.

SALICYLATE OF BISMUTH IN INFANTILE DIAR-RHGAS.—In the *Meditz. Obozrenie (St. Louis Med.* and Surg. Jour.), Dr. Mikhnevitch emphatically recommends the treatment of protracted diarrheas in children under two years of age by the internal administration of salicylate of bismuth, after the formula:

Sig.—To shake well before using. To give from one to two teaspoonfuls from three to six times a day.

Each teaspoonful of the mixture contains about one-half grain of the salicylate, which represents a normal individual dose (repeated three or four times daily) for an infant aged from six to eight months. The bottle should be kept in ice or cold water (to prevent nausea, sometimes produced by the salicylate). In emaciated children the remedy, in largest doses, is apt to induce profuse perspiration, accompanied by general weakness. Hence, as soon as the sweating appears, the dose should be correspondingly diminished. In recent cases of a few days' standing the salicylate is useless.

SALOL FOR GONORRHEA.—Dr. E. C. Underwood says (West. Med. Rep.) that salol can reduce the duration of gonorrhea to the lowest limits. The method consists in the regular employment of from forty to sixty grains of salol through the day.

I order my patients to have four doses of from ten to fifteen grains each, taken immediately on rising in the morning, at 11 o'clock a.m., 4 o'clock p.m., and the last thing on retiring to bed at night. This I ordered in a powder or compressed tablets. Having known that many of these tablets passed through the intestinal canal without being absorbed and in the form they were administered, I am now using the drng in the powder form. It is tasteless and is not complained of by patients. The dose is begun, unless unless this patient shows that the drug disagrees with him, with sixty grains a day, continued until the discharge has become very meagre. Then it gradually lessened. The author claims that better results follow this method than any other.

THE TREATMENT OF PNEUMONIA.—From an extensive study of the mortality of pneumonia under different modes of treatment, Reed, Therapeutic Gazette (Med. News) concludes that water, locally applied, either as a wet-pack or as the bath after the method of Brand, is the most efficient single therapeutic measure of acute pneumonia. first stage of the disease, veratrum viride or aconite can accomplish more than any other drug; and in the second stage the same is true of digitalis. A combination of one of these cardiac sedatives with opium and diaphoretics constitutes a safe and successful internal treatment in the first stage, being capable of aborting the disease if the administration is begun near the onset and is repeated at short intervals, day and night. Venesection, though a most efficient procedure in the treatment of pneumonia of sthenic type and, judiciously employed, considerably more successful than expectant measures, is no longer an indispensable resource in managing the disease, as other remedies have been found to accomplish the same results more surely and more pleasantly.

THE USE OF CHLORAL IN THE TREATMENT OF BOILS.—M. Sphen., Bull. Gen. de Therap., recomtreatment the use of chloral externally in this mends very highly, as far superior to all other troublesome class of effections. He directs that the boil be kept covered with a tampon of cottonwool soaked in the following solution.