

## Therapeutical Notes.

(Translated by R. Z.)

### BORACIC ACID OINTMENT.—

Boracic acid . . . . . 1 part.  
Yellow wax . . . . . 1 "  
Benzoated lard . . . . . 6 parts.

Reduce the acid to an impalpable powder by trituration with a few drops of rectified spirit, add the wax and lard, previously melted together, rubbing them to a smooth ointment. When applied this ointment allows the discharge from a wound to escape; moreover it comes off clean, leaving none adhering to the skin.

NEW HÆMOSTATIC AGENT.—Dr. Spaak (*Journal de Médecine de Bruxelles*) has used for several months as a hæmstatic, chloroform water. (1) It acts with wonderful rapidity; (2) it is pleasant to the taste; (3) it has no escharotic action; (4) it is always easily obtained; (5) it is inexpensive; (6) it does not interfere with any surgical procedure. The following is the formula:

Chloroform . . . . . 2 gr.  
Water . . . . . 100 gr.

—Dr. A. Oger, in *L'Union Médicale*.

PROSTATIC ENLARGEMENT.—Dr. Mackenzie, in the *British Medical Journal*, says, that irrigation of the bladder with a mixture of a drachm of tincture of hamamelis, half a drachm of carbolic acid, and about twenty-five ounces of warm water, arrested periodical hemorrhages from the urinary passages and the rectum in a case of prostatic enlargement under his care, and so reduced the congestion as to enable him to discontinue the use of the catheter.

FOR NASAL CATARRH.—Sulphate of soda, carbonate of soda, sulphate of potash, gum arabic and tartaric acid, of each equal parts. Dry and mix. Dose, ten grains to a quart of warm water; spray through the nose or throat as desired, twice a day.

URETHRAL INJECTIONS.—In an article in the *Lyon Médical* on injections in gonorrhœa, Dr. P. Aubert gives some good practical hints. He says that the syringes usually employed are

too large. "Four or five grammes of fluid for an adult, and five to seven for persons of more advanced age, are sufficient to fill the anterior urethra. With this quantity we can forcibly inject to the bottom without danger of passing the urethral sphincter. A more accurate method consists in introducing a thin supple rubber tube 12 to 14 centimetres long, and of No. 10 Charrière scale. The tube should not be oiled, but simply dipped in the injection fluid and passed gently to the bottom of the anterior urethra. It is to be passed 1 or 2 centimetres, a syringe attached and the injection made, the meatus being left open. The fluid necessarily reaches the bottom of the anterior urethra, and returns freely by the meatus, and no part of the canal escapes its action."

SUDDEN CARDIAC PARALYSIS AFTER HYPODERMICS OF MORPHIA.—M. Klamann reports a case of sudden death after hypodermic injections of morphia. The patient, an alcoholic, subject to violent angina pectoris, epistaxis and hemorrhages, had taken an injection of morphia during a violent paroxysm, and on the arrival of M. Klamann demanded another, which was given. He suddenly turned pale and died. The advanced age of the patient, alcoholism, and repeated hemorrhages, were evident contraindications to the use of morphia. —*L'Union Médicale*.

### FOR GLOSSITIS.—

R. Acid chromic. . . . 60 cent.  
Distilled water . . . 30 grammes.

To be applied to the tongue in cases of chronic superficial glossitis of smokers and drinkers. This method is not applicable to acute superficial non-specific glossitis, which should be treated with emollients and glycerole of boracic acid. The chronic acid solution is equally efficacious in certain cases of secondary syphilis, such as ulcers, mucous tubercles and condylomata. On the other hand, it is useless in tertiary syphilitics: gummata, deep ulcerations, tubercular syphilides. In certain cases the dose is increased. Usually its pain is slight, amounting to merely slight smarting. —*L'Union Médicale*.