

doses, fifteen or twenty drops, or more, of the fluid extract, had in his hands been beneficial. He had continued its use two or three months without deleterious results.

Dr. G. M. Hammond thought that fully eighty per cent. of all his patients were similar to those described in the paper—persons suffering from insomnia, mental anxiety, etc. In the large majority of the cases he thought insomnia was due to hyperæmia of more or less limited areas of the brain. When the patients did sleep, they had unpleasant dreams. They were also frequently sufferers from dyspepsia, constipation, spots before the eyes, noises in the ears, sometimes hallucinations connected with various senses, and coldness of the extremities. It was rare for such patients to go away without being cured, but, if they subjected themselves again to the same causes, the condition returned. He used bromides, and stuck to them right through the disease. He gave only ten or fifteen grains three times a day, and also gave fluid extract of ergot. He applied static electricity and dry cups to the back of the neck, and regulated the sleeping hours. Dr. Leszynsky had been rather surprised, in view of a recent discussion before the society, to hear the author speak of the use of hyoscyamine as a hypnotic. It was a mistake to rely upon large doses of bromides given at night. There was an objection to their use in the case of ladies, because of the bad odor which they gave the breath. He had not been able to discover any peculiarity in the circulation of the retina in these cases. Dr. Weber said that since he had adopted the treatment recommended by Dr. W. A. Hammond, and just described by Dr. G. M. Hammond, he had obtained the best results in suitable cases for this mode of treatment. But in other cases the bromides might cause excitement instead of aiding sleep. When there was gastro-intestinal disorder, he added to the treatment the use of calomel, with benefit. Dr. Leszynsky referred to a remark by Dr. Birdsall concerning the use of a sinapism, or other cutaneous irritant, and said that Dr. W. H. Thompson had called attention some years ago to the beneficial effects of Cayenne pepper and like irritants to the surface of the body.

The President had found the warm bath a very valuable measure in many cases; in mild cases of insomnia the cold douche down the back and massage, had proved useful. Bence had discovered that ozone had hypnotic influence. Lupulin had been of benefit in the insomnia of old people; and lavender in some cases in which the stimulus of alcohol or warm food had failed.

Dr. Sachs objected to the use of the bromides, particularly in small doses, more than to anything else in the treatment of the class of cases under discussion, namely, those of insomnia in neurasthenic subjects. It was likely to do more harm

than good. The testimony at the discussion referred to by Dr. Leszynsky had not been against amorphous hyoscyamine, but against the crystalline form.—*N. Y. Med. Jour.*

REMARKS ON THE RADICAL CURE OF HERNIA BY INJECTION.

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The following paper may be taken as supplementary to one already published in the *Journal* (1885, vol. ii, page 543), and originally read at the meeting of the British Medical Association at Cardiff.

I have first to say that I found the combination of cannula and syringe somewhat awkward in practice; once or twice the two came apart as I was withdrawing the cannula, allowing an uncertain quantity of the injected fluid to escape, and compelling me to guess vaguely how much more to inject to make up for the loss. For this reason I caused to be made the injection-syringe described in the *Journal* for July 17th, 1886. This I now show to you, and you see it is a probe, cannula, and syringe all in one instrument, besides having certain other advantages, such as requiring only one hand to fill, empty, and otherwise manipulate it, and being very easily asepticised.

I have further to report three specially interesting cases, all in adults, in one of which I used the injection only, while in another I felt it prudent to refrain from using the injection, and to employ merely the suture, and in a third I adopted an entirely different mode of operating—one which neither requires the use of an anæsthetic nor prevented the patient from doing his business. The first and second cases were operated on at nearly the same time, namely, March 16th and April 14th, 1886. The successful case was a young adult man, with a left inguinal hernia of moderate size, coming through a canal also of moderate size. He was admitted into the West London Hospital, and a simple injection of concentrated decoction of oak-bark was thrown into his inguinal canal, no suture being placed in the canal-walls or apertures. A thickening rapidly formed at the site of injection, which felt very much like a crown-piece wrapped up in a piece of lint. This gradually got less, but some months after the operation, he had had no return of either the hernial impulse or hernial swelling. He usually wears a truss by way of precaution, but I shall not fear to let him discard it when next I see him. The other and less fortunate case was that of a very stout gentleman, who came up from Yorkshire to be operated on. I may mention, by the way, that his brother had suffered from hernia, and been cured by injection in America. In ten years of operative experience, I have never had so many minor misfortunes and pieces of what