

therapeutically the chemical rays of the electric light. He constructed an apparatus like a telescope, in which the rays were first parallel and then became concentric, then passed through distilled water and an ammoniacal solution of copper sulphate. The strength of the currents varied from thirty-five to fifty amperes. He found that the concentrated sunlight killed cultures of the prodigious fifteen times quicker than the ordinary sunlight and that the concentrated electric light acts still quicker. Cases of lupus vulgaris—a superficial skin disease due to the tubercle bacillus—were exposed to the action of the concentrated chemical rays about two hours daily for from several days to several weeks. Soon the edges began to flatten out, the reddening became less and the ulcers cicatrized, the scar having a good appearance. Stronger electric light, current of eighty amperes, and a lens of rock crystal was more efficacious. Of fifty-nine cases of lupus which were treated twenty-three were cured, thirty which had improved were under treatment and six discontinued it.

ANALGEN IN MALARIA.

SCOGNAMIGLIO.—Some clinical and experimental investigations on analgen and its use in malaria. (*Keil-kunde, monatsh. f. pract. med.*). By the use of 0.5 to 0.6 gm. of analgen three to four times a day the author succeeded in relieving entirely within two to eight weeks various neuralgias, as sciatica, trigeminal and intercostal neuralgia, uterine colic multiple neuritis and the lancinating pains of tabes. In cephalalgia the same dose two to seven times a day acted very favorably and in acute articular rheumatism (2 to 3.5 gm. pro die) there was a distinct subsidence of the pain without untoward symptoms, so that he considers it a true specific. In three cases of bronchial asthma with a dose of 0.5 to 1.0 daily a cure resulted in three months. Its

actions in various forms of malaria (40 cases) was excellent, especially so in those cases in which quinine was not tolerated. It was given three times, in doses of 0.5 to 1.5 gm. two or three hours before the quotidian attacks and eight to ten hours in the other types. The examination in nineteen cases showed a destruction of the amœbæ in from twelve to sixteen hours after the administration of the agent. In none of the above cases were any injurious effects on the kidney proven as shown by the absence of sugar, albumen and blood. He claims that it is one of the best acquisitions of modern therapeutics, that as an antineuralgic it is unsurpassed and that it is the best substitute for quinine.

STYPTICIN IN UTERINE HÆMORRHAGES.

BAKOFEN.—Stypticin in uterine hæmorrhages. (*Muench Med. Woch.*, 1898, p. 419). While most cases of uterine hæmorrhage demand operative interference, yet there are cases in which it is unsuitable and the hæmorrhage may be influenced by drugs. For this purpose stypticin or cotarninum hydrochloricum was introduced by Freund. It is a derivative of narcotine and is chemically related to hydrastin. It comes as a sulphur yellow amorphous powder, which is readily soluble in water and can be administered in doses of from 0.025 to 0.05 several times daily, either as a powder or in solution, and may be even used subcutaneously. Suitable formulæ are as follows:

R. Stypticin 0.05.
 Sacchar. alb. 0.5.
 M. f. pulv.
 D. tal. dos. no. xv.

S.—4 to 5 times daily.

or R. Stypticin 1.5.
 Pulv. et succ. liquir. q.s. ut. ft.
 pilul. no. xxx.

S.—4 to 5 times a day.

If it is going to prove efficacious