Liquor Potassæ Arsenitis, 1.5 iss.
Tinct. Cinchonæ, 5 iij.
Syr. Aurantie, 5.7

M. Hujus mist., sumat cochl. min. bis terve in die.

During the last two years, intermittent levers have occurred more frequently, in some parts of this city, and in the vicinity of the city, than for many previous years. In some of these cases, where the disease has proved obstinate, not yielding to the largedoses of quinine, long continued, we have found it to be promptly arrested by the administration of a teaspoonful of the following mixture, twice or three times a day,—the last dose being administered a short time before the period of the anticipated paroxysm.

R. Quiniæ sulph, 5j.
Liquor potassæ arsenitis, 6.3 ij.
Acidi Sulph. Archat.. 6.3 j.
Tinet. Cinch. Co.
Syr. Zingiberis, aa. 3 ij.

When the preparations of arsenic are employed, it is satest to give the medicine after a meal. When thus exhibited, larger, or more effectual doses may be given with more safety, than when taken fasting. Should however, gastric irritation arise, under its use, or swelling and stiffness of the eyelids occur, the medicine should be immediately discontinued.

Should it from any cause be desirable to administer these remedies in the form of a pill, we may employ the following formula:—

R. Acidi Arseniosi, gr. ij. Quiniæ disulphatis, 3j. Conserv. Roste, 5ss.

Misce optime, et fiat massa, in pilulus xxx. dividenda; sumat unam bis quotidie.

We have had, recently, much experience in the use of the different preparations of Manganese, and have become fully satisfied, that this mineral tonic, in its different combinations, will prove a most valuable

addition to our pharmaceutic preparations.

The presence of Manganese in the blood, has been fully established by the experiments of MM. Millou, Hunnon, and others; and, recently, M. Burin, in a memoir presented to the French Academy of Medicine, has given an analysis, by which he shows the amount of manganese in the blood globules, and exhibits the condition in which it exists. It is indeed as constant an ingredient of this fluid, in its normal condition, as iron, and it is well known that a deficiency in quantity, of both these metals, may be observed in the blood in many cases of antemia, chlorosis tuberculosis, &c.; and hence the employment of manganese is proper, in most instances, where the administration of iron is indicated. Frequently both may be given in combination, with great advantage.

The most important preparations of manganese, for pharmaceutical purposes, are the phosphate, the malate, and the iodide, of manganese.