

held firmly against the packed wool, the mouth of the sac is pulled upon, and thus its bottom with the wool packed in it is pulled forward, and forms a firm, hard plug wedged in into the posterior nares. We may now pack the sac full of cotton-wool, dry or soaked in some astringent solution. The mouth of the sac may now be closed by tying it just outside the nostril with a piece of strong thread; it is then trimmed by scissors and the ends of the thread secured outside.

The above method is easier than any I know when both nostrils have to be plugged. It might be suggested to oil the cotton or silk in order to render its introduction easy and to prevent it adhering to the mucous membrane, and to render it easy of removal; but I have never found any difficulty without the oil, as the blood renders the material wet and easy of introduction, while the oil does not facilitate removal, and may modify the effect of the astringents that may be used. The plug may remain in situ as long as any other nose plug. In removing the plug, open the mouth of the sac, and with small dressing forceps remove the cotton-wool bit by bit; if there is bleeding, simply syringe the sac with weak carbolic lotion or Condy's fluid, and repack with clean cotton-wool, or wool impregnated with some antiseptic. If there is no bleeding when the wool is picked out, gently pull out the sac; or if it be adhering to the mucous membrane, syringe in a little warm water, and it may then easily be removed. This method has many advantages: (a) It is easy, quickly accomplished and effectual, and the materials are to be found in every house, and, indeed, about everybody's person (I have plugged in this manner, simply using a handkerchief, one part of which was used for the sac, and the other torn into narrow strips, in place of the cotton-wool); (b) no damage is done to the floor of the nose or back of the soft plate by strings, etc.; (c) no disagreeable hawking, coughing or vomiting takes place while the plug is introduced; (d) there are no disagreeable strings left hanging down the throat, causing coughing or sickness while the plug is in; (e) the plug can be removed gently without any force, so that no damage is done to the mucous membrane and no return of hemorrhage caused. I employed this method frequently when in country practice, and do so now in bleeding after operation on the nares, and have always found it to be satisfactory. As the method has been of great use to me, and as I am not aware that anyone has spoken of it before, I take the opportunity of mentioning it, in the hope that it may be of some use to some brother practitioner when confronted by an urgent case of epistaxis, and other means of plugging are not at hand.—Philip, in *The Lancet*.

ENURESIS.

418. R. F. (*Das Rothe Kreuz*, No. 19, 1892) warns against punishing children for bed-wetting. He suggests that the cause usually is hardened smegma under the prepuce or a malformation of the prepuce calling for circumcision.

He also attributes it to intestinal worms, which may be removed by giving on two successive evenings santonine 2 or 3 grammes (30 to 45 grains) with sugar, and castor oil on the following mornings.—(A dangerous dose. Ed. REC.)

Stone in the bladder may also produce enuresis.

When the cause of bed-wetting is not ascertainable, he recommends reducing all fluids to a minimum and giving the child nothing to drink after 4 or 5 P. M. He urges that the child be encouraged to void its bladder immediately before going to sleep and in the early morning.

To render the dorsal decubitus impossible, he advises enveloping the child's waist in a towel and adjusting therewith a hard substance over the spine. Light bed-clothing must be employed.

Exercise in the open air is recommended, attention being given to keeping the feet warm. Flannels should be worn next to the skin. Cold spongings morning and evening render good service, especially if a little table-salt is added to the water used. Then friction with a coarse towel, applied especially to the spine, is advised.

Little or no meat is to be allowed.

Belladonna is recommended on account of its tendency to paralyze the vesical muscles. He gives 3 or 4 drops of the tincture in lemon-juice, morning, noon and night for a considerable time.—(*Condensed Extracts*.)

QUININE IN DISEASES OF THE RESPIRATORY ORGANS.

429. Iglesia (*Der Kinde-Arzt*, October, 1892) says that quinine proves useful:—

1. In all cases of larvated asthmatic affections of a pernicious character;
2. In broncho-pneumonia, quinine in combination with preparations of ammonia, alcoholic remedies, etc., is indicated;
3. In whooping-cough quinine frequently yields good results;
4. In pulmonary hæmorrhages and pulmonary congestions the salts of quinine act as hæmostatics.—(*Condensed Extracts*.)

SYRUPS (PRESERVATION OF).

440. The *Drogisten Zeitung* (Leipzig, September 16, 1892) recommends the following methods for the preservation of syrups:

1. Pour hot syrup into bottles, filling them to the top without leaving space for corks.