

When the nose is affected, a tampon soaked with the solution is retained in the cavity, and in milder cases the application of pyoktanin to the pharynx, etc., is the only treatment followed. In support of his practice, Horing says he has found even a 1 in 1,000 solution to destroy the Klebs-Loeffler bacillus, as also the more active streptococcus, the latter in the course of half a minute. In practice, the local effects are antiseptic, healing and destructive to the false membrane, the general results being diminution of pain and pyrexia without the production of toxic symptoms. The present cases enumerated are 112, two of which succumbed for reasons explained; the remaining 110 cured cases included many serious cases which had been despaired of. The symptoms, spread of contagion, and sequelæ, are quoted in support of the diagnosis. The author, in view of his experience, supported by that of others, regards pyoktanin as a specific against diphtheria.—*British Medical Journal*.

#### GYNÆCOLOGY.

##### Dilatation of Cervix for Dysmenorrhœa.

—Pond (*Annals of Gynecology and Pediatrics*) considers three cases of dysmenorrhœa according to the etiology.

1. Where the cervix is small and elastic.
2. Where the cervix is long, conical, non-elastic and cartilaginous.
3. Where there are associated flexures.

In the first variety he recommends the use of a light Palmer dilator, one or more times, without anæsthesia. It should be carried to the full expansion of the blades, and applications made to the canal, or a strip of iodoform gauze introduced. This can be carried out at the office.

For the second condition he recommends the free division of the stricture on two or more sides, from the internal to the external os, with thorough dilatation, and the introduction of a stem to be worn ten or fourteen days, or longer if necessary. Following this, the cervix should be dilated once or twice a month to avoid subsequent contraction. Very long cervixes require amputation.

In cases of flexion where, at times, it seems impossible to pass the light dilator, the Elliot repositior should be used, the organ carried into retroflexion, when the dilator can be easily passed

beyond the angle of flexure. Should the cervix be dense, a heavier instrument may be used, and if this fail, incision and the stem are resorted to.

He reports seven cases illustrative of the application of the treatment in the different conditions, and suggests that dilatation be adapted to the relief of stenosis even in young girls.—*Medical and Surgical Reporter*.

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#### Personals.

Dr. Mitchell, of Blenheim, has been appointed associate coroner for Kent.

Dr. Cranston has been chairman of the Arnprior School Board for twenty five years.

Dr. H. H. Oldright, on the event of his marriage, on which we congratulate him, has removed to 492 Spadina Ave.

Dr. Keating, the well-known physician and author on pediatrics, died at his home in Philadelphia, on the 18th inst.

Dr. J. M. MacCallum, Professor of Therapeutics in Toronto University, left Toronto on April 13th for Europe, where he intends spending the next six months in study.

Dr. William Pepper has resigned from the position of Provost of the University of Pennsylvania. On retiring he made a contribution of \$50,000 to the fund for the extension of university hospital buildings.

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#### Obituary.

##### DR. BROWN-SEQUARD.

Dr. Charles Edward Brown-Sequard, the famous physician, died on April 2nd. He was seventy-six years of age.

Dr. Brown-Sequard was born in Mauritius in 1817. His father was born in Philadelphia, and his mother was a native of France. He devoted the most of his time after his graduation as a physician in 1840 to an extended series of experimental investigations on important physiological topics. He visited the United States many times, delivering short courses of lectures and instructing