

more uniform. It contains twenty to thirty grains excess of potassa to the ounce.

Unguentum diachyli is not contained in the United States Pharmacopœia, nor in the dispensatory; it is now, however, made pretty extensively, and is one of the formulæ contained in the University Pharmacopœia. It is made thus:—

℞. Plumbi oxidi, 3 iss  
Olei olivæ, 3 viiss.

The oil should be first mixed with water and heated; then, while fresh water is poured in and the mixture stirred, the litharge is gradually added.

The method of employing the *sapo viridis* and *unguentum diachyli* is as follows: A small piece of the soap, the size of a nut, is rubbed into the skin over the affected part, a little water being added from time to time, for ten to fifteen minutes. The effect produced by rubbing with the *sapo viridis* is the breaking down of any vesicles that may be present, and clearing away of the debris of epithelium, crusts, etc. The surface of the diseased skin under this procedure pours out an abundant fluid, and little bleeding points may be seen here and there. The skin is now washed thoroughly clean with warm water, and carefully dried with a soft towel; it is then ready for the ointment. This has been already prepared for use by spreading it thickly upon strips of soft linen two or three inches wide; these are now applied to the diseased surface and secured in position by a bandage. The pain caused by rubbing in the soap becomes quickly allayed, and relief follows. This application of *sapo viridis* and *unguentum diachyli* should occupy, if properly carried out, nearly an hour in its performance, and should be repeated morning and evening. It is useless to attempt this method of treatment unless it can be carefully carried out, and it is only applicable in cases where the disease is strictly local.

After two or three weeks of treatment, improvement, as a rule, ceases, and a change must be made. The following ointment is usually useful at this stage:—

℞. Picis liquidæ, 3j  
Cerat. simpliciis, 3j. M.

or some other ointment, as the dilute nitrate of mercury, or red oxide of mercury ointment, may be employed. With one of these the cure of the patient can generally be completed.

Different patients will be found to vary as regards toleration of ointments. One will improve under an ointment containing four drachms of tar to the ounce, while for another half a drachm to the ounce is as strong as can be borne.

In regard to lotions, little has been said.

These are not often used in eczema of the leg—unless the disease be very acute.

It is worth careful study to be able to cure a case of chronic eczema rubrum of the leg. The disease is one difficult to treat unless thoroughly understood.—*Philadelphia Med. and Sur. Reporter*.

#### THE MANAGEMENT OF DIPHThERITIC PARALYSIS.

The eminent Sir John Rose Cormack says on this subject, in the *Edinburgh Medical Journal*:—

Iron is particularly indicated in diphtheritic paralysis, as the patients are always anæmic. There are few cases in which its administration does not prove itself in an obvious manner to be useful in a high degree. Sometimes it is only borne in very small doses.

*Nux vomica*, either in the form of extract or the liquor strychniæ of the British Pharmacopœia, taken daily, with some ordinary combination of laxatives, such as the compound rhubarb pill of the British Pharmacopœia, ought to constitute a part of the treatment in nearly every case. It increases the peristaltic action of the intestine, imparts expulsive and retentive power to the bladder, and likewise has a general influence in improving innervation. The dose ought to be moderate, for large doses prove too exciting to the nervous system, and so tend to exhaust rather than invigorate its flagging powers. From half a grain to two grains of the extract once a day, with or without the occasional or constant addition of from five to ten drops of the liquor strychniæ two or three times a day, are suitable doses.

Local treatment is of the most importance, with a view to direct toward the wasted and wasting muscles a greater supply of blood, and thereby improve their nutrition. Occasional blisters act very beneficially in this way; but they must not be relied on to the exclusion of the constant use of stimulating pastes or liniments. I do not know of any local stimulant more efficacious, or better adapted for continuous use, than a ginger and mustard paste. The object of using the paste is to maintain a warm glow in the skin without vesicating it. The potency of the paste must therefore be proportioned to the susceptibility of the skin. By applying too powerful a stimulant to an extensive cutaneous surface, we may be obliged to suspend the local treatment, and so impede the progress of the cure. In some excitable patients who cannot bear long-continued counter-irritation of the skin, a gentle kneading of the paralyzed muscles three or four times in the twenty-four hours will be found useful as a means of directing a supply of blood to them. In such cases, after each kneading, a moderately stimulating liniment containing a small quantity of laudanum may be applied with great benefit. The laudanum prevents an un-