

and the other symptoms of nephritis had diminished. In regard to diet, the patient was ordered the following: 1. Suppression of meat, eggs, especially those containing a large amount of albuminous material. 2. Macaroni with very little cheese, but as much butter or other fatty substances as required. 3. An almost exclusively vegetarian regimen: chocolate, potatoes, rice slightly cooked. 4. Sheep's brains and sweet bread so rich in phosphorus. 5. Abstinence from wine or other alcoholic drinks, and even beer. (A small quantity of this beverage produced an increase in the amount of urine in the author's patient.) For drinking purposes, tea and mineral water.—*Therapeutic Gaz.*

STRONTIUM SALTS IN THE TREATMENT OF VOMITING.—After Laborde had shown that strontium, in spite of its chemical analogy with baryta, is free from every poisonous quality, many experiments were made to insure for it its appropriate place in therapeutics. Dr. Guisto Coronedi (*Internationale Klinische Rundschau*, No. 35) tested its value as a sedative for vomiting. It proved effective not alone upon the nervous vomiting, using the word nervous in a clinical sense, but for vomiting as a symptom of genuine stomach affections.

He made use almost entirely of bromide of strontium. The preparation must be perfectly pure, not containing the slightest trace of baryta. The solid form is preferable, on account of the unpleasant taste. According to his investigations the bromide of strontium is not decomposed in the gastro-intestinal canal, but acts directly upon the organism. He observed eleven cases. In ten cases the result was positive, the dose suppressing the vomiting every time. The one adverse result was in a case of mechanical vomiting from pyloric stenosis, resulting from a carcinoma of the epiploön and the liver. The bromide of strontium was given in doses of from fifteen to forty-five grains daily (the single dose usually fifteen grains). The dose was given immediately before or immediately after meals. He was not able to note the slightest disturbance when the use of this remedy was continued during a relatively long time, even up to fifteen days and more than a month. In doses of one drachm per day and one-half drachm doses, he found it very effective for stomach ache, as he found by personal experience.

In some cases comparisons were made with bromide of potassium and other bromine preparations, also with menthol, opium, and belladonna, but bromide of strontium proved more effective than any of these remedies.—*Therapeutic Gazette.*

SLEEP MOVEMENTS OF EPILEPSY.—Putnam (*Journ. of Nerv. and Ment. Dis.*) suggests that a study of the movements (apart from the mere restlessness of unquiet sleep) occurring in some epileptics while asleep may possibly demonstrate that the site in which the discharging lesion originates is indicated by the movements. One patient, who usually had a fit about 10 p.m., was noticed by him slowly to raise her left arm over her head, momentarily hold it in that position, then let it slide down the pillow. The act was repeated several times within a few minutes. No fit occurred that night. In a young girl who had been epileptic for ten years, definite sleep movements were habitual; the left arm was suddenly drawn up above the head, then let fall. When in a fit, the body was drawn to the left side, and the left fist rested on the corresponding shoulder. Removal of a layer of cortex from the arm centre in the right cerebral hemisphere of this patient was not followed by any benefit.—*British Medical Journal.*

SYPHILIS AND PUERPERAL CONVULSIONS.—Gustave Lang (*Archives de Tocol. et de Gynéc.*) has collected statistics in relation to this subject. His labours were originally suggested by a case of eclampsia in a syphilitic subject. There was complete coma in the intervals between the fits. The child was delivered spontaneously, and died, as well as the mother. In order to solve the question at issue, Lang searched statistics, which showed the frequency of simple albuminuria in the pregnant in general and in syphilitic pregnant women, and the frequency of albuminuria with casts in the same two classes of patients and in puerperal eclampsia. The percentage of affected cases reported by Wiegner, Ingersley, Hiridoyen, Leopold Meyer, Galabin, and Olshausen is given in the following table:

<i>Simple albuminuria:</i>	<i>Average</i>
Pregnancy in general.....	3.4
Pregnancy with syphilis.....	5.55