

action you may obtain also by other antimonial preparations,—kermes mineral and the white oxide of antimony. The latter preparation, which is a good expectorant, especially for children (recommended highly by Roger), may be given in the dose of a scruple or half a drachm in mucilage or sirup. The following calmativ potion may be taken during the day; it contain kermes:

R Hydrated sulphuret of antimony...0.50 (viiss gr.
Aqua lauro cerasi.....
Aqua tiliae Europ.....
Aqua lactucarii.....
Syrop of poppies.....aa 30. (3 i) M.

By the side of these medicaments I would place ipecac, whose effects in the treatment of pneumonia have been much vaunted. The school of Montpellier has most earnestly advocated the use of this remedy in pneumonia. Broussonnet, Pecholier, Ressiguiet, among others, have recommended it. Ipecac acts in two ways: it modifies the secretion of the bronchial glands and aids expectoration; on the other hand, it excites vomiting, and thus diminishes congestion of the lungs, and aids the expulsion of bronchial mucus. Perhaps, also, we should mention in this connection the slowing action of ipecac on the circulation, so well described by Pecholier, Dyce, Duckworth, and others. Ipecac is given in pneumonia in the dose of one gramme and a half to two grammes (twenty to thirty grains).

We come now to other medicaments which act on the circulation and the temperature—digitalis, quinine and veratrum.

The usage of digitalis in the treatment of inflammations originated with the Germans. Traube, in 1850, was one of the first to recommend it in plegmasias; it is the school of Strasbourg that deserves the credit of demonstrating all the benefit which we may obtain from this medicinal agent in the treatment of pneumonia. The labors of Hirtz, Kulp and Coblentz deserve mention in this connection, while in France Gallard, Picot and Tony Saucerotte have all vaunted the good results of digitalis in pneumonia.

Having spoken at length of the physiological and therapeutical effects of digitalis when lecturing on diseases of the heart, I shall not repeat what I then said. You can readily understand, gentlemen, that digitalis, by its action on the circulation, can have a marked influence on the two manifestations the most characteristic of the fever, the pulse and the temperature. But these antipyretic effects are not obtained without certain dangers, and while recognizing the fact that in the dose of one gramme of the powder of the leaves in infusion or maceration, digitalis produces a remarkable lowering of the temperature, it may, nevertheless, dangerously affect the heart. Therefore, despite the authority of the Strasbourg school, this medication is little employed in our country.

The same may be said of the treatment by quinine, so much in vogue in Germany, and employed with success by Vogt, Wachsmuth, Liebermeister and Jurgensen. But sulphate of quinine in the proper therapeutic dose is a very uncertain antipyretic medicament, and in order to obtain a marked fall in the fever heat you are obliged to give doses which are almost toxic. This is, indeed, what Liebermeister, and especially Jurgensen, have done, for they have administered as much as five grammes (seventy-five grains) of sulphate of quinine in a single dose to a pneumonic patient. It is a dangerous practice, and is to be reprobated, and I would recommend you never to give quinine in pneumonia in large doses, except where there is a marked malarial element in the case.

Along with quinine as an antipyretic we must class veratrum viride and its alkaloid veratrine. Thanks to the labors of Aran, Piedagnal, Norwood, and especially Thibirtz, you know the depressant action of this drug on the circulation; you understand, therefore, why veratrum has been advised in pneumonia. It has been given in the form of granules of veratrine, each granule containing one milligramme (one-sixtieth of a grain), three to five of these grammes being a very full dose. Much oftener you will hear prescribed the tincture of veratrum viride, in the dose of four to six drops [two drops every hour or two till there is a marked slowing of the pulse, is a popular way of giving it in the United States]. I do not think that much success has followed, or is likely to follow this treatment; at least, in this country; it rapidly induces vomiting and collapse, without notably modifying the fever or lessening the duration of the pneumonia.

I shall have finished the consideration of remedies which produce diminution of the pulse and temperature, and which act as antipyretics, when I shall have spoken of the direct application of cold to patients affected with pneumonia. The subject of cold baths in pneumonia (a mode of treatment confined mainly to Switzerland and Germany), also those modes of treatment which, by supporting the system during the evolution of the malady, appeared to me to be far the most rational, I shall reserve for my next lecture.—*Boston Med. and Surg. Journal.*

PRACTICAL POINTS FROM PHILADELPHIA CLINICS.

Dr. Carl Seiler removes polypi from the nasal cavities with the snare, as this causes less bleeding than the polyp forceps, and touches them with galvano-cautery. This prevents the return of the growth, which nothing else will, the doctor having tried iodine, chromic acid, etc. This procedure certainly merits further trial.

Dr. Wharton recommends that superficially situated naevi be cauterized with the strong nitric acid, applied with a glass rod. The resulting