

We occasionally meet cases of continued distress, despite the use of ordinary means. In these cases there is usually much bronchial tumefaction and dryness. In cases of this class nothing can equal $\frac{1}{4}$ grain of pilcarpine with $\frac{1}{4}$ grain of morphine, administered hypodermically. The relief is prompt, the tumefaction subsides and is followed by profuse expectoration. As to change of climate, experience shows that the asthmatic should not seek a dry atmosphere. A warm, moist atmosphere is the most suitable. In mild cases a mere change from one locality to another may create immunity from this harassing trouble.

The remedies here mentioned, which are culled from a large number of remedies in use, seem to be the ones most relied on at the present time. It must not be understood that the remedies in this list are to be depended upon in symptomatic asthma, when the condition is merely a symptom of a disease usually of a much graver nature. The bronchial muscles are here in a normal condition, some probably serious organic trouble being the cause of the symptom, and requiring a separate treatment, as indicated by the pathological conditions.—*The Canada Lancet*.

VOMITING OF PREGNANCY TREATED WITH MENTHOL.

The most unpleasant symptom accompanying pregnancy is undoubtedly the vomiting which often occurs, and this is especially serious because our present knowledge of its therapy is most unsatisfactory, and, in many instances, the physician is at loss to know how to proceed. It is not unfrequent that all the therapeutic measures fail and relief is only obtainable by the induction of abortion.

Guided by the fact that the trouble must be regarded as a reflex neurosis, and that, theoretically, drugs which would depress the reflex excitability should also act beneficially in this complication, Dr. Sigmund Gottschalk, of Berlin, has used menthol in this disorder with marked success. He employed a solution containing fifteen grains of menthol in five and a half fluid drachms of alcohol and five fluid ounces of distilled water. Of this he gave a tablespoonful hourly. In a case so treated, and reported in the *Berliner Klin. Wochenschrift*, October 7, 1889, the vomiting ceased after the third dose, although previously other remedies had been used unsuccessfully. The patient was able to retain food and subsequently made a rapid recovery. The drug was continued for three days, the dose being gradually decreased.

The use of menthol is continually widening and there seems to be good reason on purely theoretical grounds for expecting that the results obtained by Dr. Sigmund were not in the nature of a coincidence, but that they indicate a rational addition to the therapeutics of the vomiting of pregnancy.—*Echange*.

VARIOUS METHODS OF TREATING PSORIASIS.

The *Medical Chronicle*, October, 1889, in reviewing several of the more usual external and internal measures for the treatment of psoriasis, says:

Most authorities prefer arsenic to any other internal remedy. It may be given in the form of pills or as Fowler's solution, either in the ordinary way or hypodermically, when filtered or combined with an antiseptic. Tar water, carbolic acid, turpentine, copaiba, phosphorus, and even cantharides are spoken of as remedies. Bulkley (*New York Medical Journal*, July, 1889) says that alkalies are often beneficial. "The best form to give them in is acetate of potassium, lithium, or calcium." Iron and cod-liver oil he finds useful. Oils and fats if digested, pure woollen clothing next the skin, and a warm equable climate he considers important factors in treatment. Gutteling (*Weekbl. van het Nederl. Tijdsch. voor Geenesk.*, No. 17, 1889, abstracted in *Wiener med. Blätter*) reports on the results of treating 22 cases of psoriasis vulgaris with large quantities of iodide of potassium. The remedy was given frequently and the doses gradually increased. Five cases were completely cured; in 5 the iodide had to be abandoned. There was a decided improvement in the 12 cases remaining. The largest quantity given in one day was 57 grammes (about 14 drachms), and the largest amount taken during the whole course of treatment by a single patient was 3684 grammes (about 7 pounds). Several patients gained weight whilst taking enormous doses of the iodide, whereas only a few of them had acne or iodidic purpura. The drug is said to be especially beneficial in recent cases. Daily doses of from 10 to 20 grammes (about 2½ to 5 drachms) are recommended. If, owing to failure, large doses have to be resorted to, the improvement will be incomplete. In the five cases which were completely cured, the course varied from fourteen days to four and one-half months. Barduzzi (abst. *Brit. Journ. Dermat.*, from *Gazetta d. Ospitali*, 17, 1889) confirms the good results obtained by Dutchmen: "In three diffuse universal cases of very inveterate character, which had been treated with transient success by all the usual remedies, he obtained results from iodide of potassium which he never hoped for. In none of his cases was the amount of the drug larger than 7 grammes (105 grains) daily."

According to Bulkley, visits to mineral springs reputed to cure psoriasis lead only to disappointment. "He did not know of a single cure effected by sulphur waters, though the reputation of such waters was the highest of any." With regard to external applications, the treatment should vary with the cases. Bulkley has abandoned the use of chrysarobin, antharobin, and pyrogallol, because he has found that white