

THE TREATMENT OF VEGETATIONS ON THE GENITALIA BY RESORCINE.

Silbermintz (*Gazette des Hôpitaux*) employs resorcine in the following manner in destroying vegetations situated in the region of the genital organs. If they are isolated and have pedicles surrounded by normal skin, he paints them with pure resorcine, using a brush slightly moistened and covering them over with dry dressing. The applications are repeated daily till they dry up and drop off. When they are multiple and sessile, situated on the prepuce, the glans, in the balano-preputial groove, the inguinal fold, about the anus or around the vulva, he paints them over with a collodion containing ten per cent. of oil and twenty per cent. of resorcine. The parts should be made perfectly dry and the collodion should extend an eighth of an inch upon the surrounding sound skin. After the first application, the epidermis will be removed with the collodion, and successive layers with each application till finally an ulcer results, pitted where the roots have been removed. Slightly astringent dusting powders will rapidly heal it. Where the skin is dry, as on scrotum or external aspect of the labia majora, the author employs a 50 per cent. resorcine collodion. In all cases a boric acid wash should be ordered in conjunction with the applications.—*Inter. Med. Mag.*, Oct., 98.

THE TREATMENT OF CHRONIC ULCER OF THE LEG.

Charles H. Thompson, M. A., M. D. (*Lancet*, August 27, 1898), has employed strapping with success in forty cases of leg ulcer. Nearly all had had months of hospital treatment up to the time strapping was commenced, but with little or no improvement; in some instances the ulcers extended. Many of the patients had varicose veins, and œdematous legs, and they almost invariably expressed themselves as much relieved soon after treatment was begun. The strappings were made with the ordinary adhesive plaster spread on stout, pliable holland and supplied in 12-yard rolls 16 inches wide. It must be cut into various lengths according to size of leg, each length being about $1\frac{3}{4}$ inch wide, and applied so that the strips overlap by $\frac{1}{3}$ inch. It is best to include the foot, commencing at the base of the toes and carrying the strapping up the leg to three or four inches above the ulcer, which is thus completely covered in. A strong cotton bandage should be applied over all, reaching from the toes to the knee, and this should be changed by the patient