

hypophosphites and syrup of hydriodic acid are indicated. Iodide of potassium may be substituted for the latter when it is not well borne and where the diet consists chiefly of milk.—*Amer. Lancet.*

PEROXIDE OF HYDROGEN IN STOMATITIS.—Boennecken, in a paper on stomatitis insists upon the importance of paying attention to the mouth during acute febrile or wasting disease; stomatitis originating in neglect of attention to the cleanliness of the teeth, gums, etc., may have a serious influence in retarding convalescence. The value of antiseptic applications is generally accepted, but the solutions of chlorate of potassium and permanganate of potassium commonly used are not sufficiently concentrated to have an antiseptic action, especially when the short time they can remain in contact with the mucous membrane is taken into consideration. Moreover, these strong solutions are apt to be painful. Boennecken strongly recommended solution of peroxide of hydrogen; it is not poisonous; does not cause pain; and has an effective antiseptic action even in solutions so weak as 2 per cent., or even less. He states that by its use foeter is corrected in a few minutes, and that its continued use was followed by a marked improvement in the condition of the epithelium in twenty-four hours and complete cure of even severe cases in five or six days. Leo, in the discussion which followed the reading of the paper, stated that he had also obtained very good results, but that in chronic stomatitis a solution stronger than 2 per cent. acted better. Wolters had found the peroxide in 5 to 10 per cent. solution very useful in mercurial stomatitis. Binz, however, regarded chlorate of potassium as equally effective, and observed that it probably acted in the same way as the peroxide, namely, by liberation of nascent oxygen.—*Br. Med. Jour.*

BISMUTH SUBGALLATE TO RELIEVE FROM DYSPEPSIA.—The particular recommendation for treatment offered by Dr. Austin Flint in an article, "Remarks on Fermentative Dyspepsia," in the *N. Y. Medical Journal*, Oct. 4, 1893, is bismuth subgallate (known as dermatol), as follows: "In nearly every case of functional dyspepsia that has come under my obser-

vation within the last ten months I have begun the treatment by giving five grains of bismuth subgallate, either before or after each meal. In some cases it seems to act more favorably when given before meals, and in others its action is better if taken after eating. In studying my records and memoranda of cases, I find that the treatment by salicin has often been unsatisfactory. The proportion of unsuccessful cases was about twenty-five per cent.; but in some cases the effects of this remedy given alone have been remarkable. I have full records of one case of severe dyspepsia of ten years standing that was completely relieved in a week without any return, now for more than a year. The bismuth subgallate, however, is almost a specific in cases of purely functional dyspepsia with flatulence. While I have full records of a few obstinate cases, the histories of most are merely short memoranda, and of many I have no records. Since December 8, 1892, when I began to use the bismuth subgallate, I have noted only two cases in which it gave no relieve, there being no evidence of organic disease. Both of these were in hysterical women. In both I used salicin and salol; and in one, salol, salicin, naphthalin, and aristol. These were cases of long standing which had resisted treatment of every kind, and they soon passed from under my observation.—*Ex.*

IODIDE OF STRONTIUM.—While the salicylates answer all purposes in acute rheumatic fever, they are of little value in the nonfebrile forms. Two such cases have been under my care during the past winter. As long as they took sodium salicylates in full doses, the symptoms were reduced to a minimum, but immediately returned on the discontinuance of the drug, which, moreover, had a deleterious effect on the health. I then directed these patients to take the solution of Strontium Iodide (Paraf-Java,) beginning with four drachms daily. Improvement followed, and the dose was gradually reduced to one-half. The effect was very good; the symptoms gradually subsiding while the general health improved. Both patients resided in damp houses; and the rheumatism showed a tendency to recurrence, though at intervals much longer than when under the salicylates.—*WARRIL.—The Times and Register.*