

harmonize with the opinions most generally held. He maintains the superiority of mercury. As respects the diagnostic value of the two agents—iodides and mercury—he never decides the question of specific lesion or not, except from the results of a trial of mercury. In three examples of old syphiloma of the testicle—cited for illustration—the iodide of potassium in massive doses failed to disperse the tumor, but mercurial treatment effected a cure in a few weeks, thus demonstrating the nature of the neoplasm.

Professor Verneuil does not advocate the huge doses of iodide of potassium now in vogue—30 to 45 grains per day being his maximum—except in cases of rapidly destructive ulcerations of the nares, veil of the palate, and similar lesions, and even then in quantity not exceeding 75 or 96 grains *per diem*. He has never favored the conjoint administration of mercury and iodides. He prefers to give mercury by itself, and associated with remedies to improve the general state of the patient. He has occasionally made use of the combination of these remedies in slowly developing secondary or tertiary accidents when mercury does not act well, or has not been given at all. Under such circumstances he prescribes in the simplest way $\frac{3}{4}$ grain of protoiodide of mercury and 15.5 grains of potassium iodide.

Mercurial frictions, although in some cases acting energetically, do not commend themselves to his judgment. When he has employed inunction, he has not dispensed with the internal administration of the protoiodide or some other mercurial, in small doses. Nor has he practised the method of subcutaneous injection of mercurials, which often cures, apparently, in twenty to thirty days. He holds that the most certain curative results are obtained by the slow saturation of the organism as effected by the stomachal administration rather than by sudden impression.

For the local treatment of syphilitic ulcerations, mucous patches, etc., the early manifestations of the constitutional state, he employs nitrate of silver, or chloral solutions, topically, in conjunction with the use of mercury internally.—*Am. Jour. Med. Sci.*

THE TREATMENT OF EXOPHTHALMIC GOITRE.—Dr. R. Vigourour (*Le Progrès Méd.*) lays great stress upon the kind and method of application of electricity in the treatment of this affection. He employs faradization in the following manner: (1) A large electrode from 7 to 8 ctm, in diameter is applied to the inferior part of the neck posteriorly, and is held in position by the means of a band. The other electrode is olive-shaped or button-shaped, less than 1 ctm. ($\frac{3}{8}$ in.) in diameter, and is connected with the negative pole of the battery. This electrode is applied behind the angle of the jaw, in front of the sterno-mastoid muscle,

and is made to press upon the carotid artery. The application is made during a minute and a half, and is then transferred to the opposite side, where it is continued for the same length of time. (2) The small electrode is then passed lightly over both orbiclares palpebrarum in turn. (3) The olive electrode is now replaced by a plate 4 ctm. ($1\frac{1}{2}$ in.) in diameter, and is applied to the thyroid tumor. (4) The small electrode is now rendered positive, and is applied to the precordial region, in the third intercostal space, to the left of the sternum, and the current should be sufficiently strong just to excite fibrillar contractions. The application is made for two or three minutes. The seances are repeated every second day. There is no advantage in repeating them daily. The ill success of the of this affection by some, the author thinks, is due to want of attention to the foregoing details. In most cases it was the only treatment he employed, and his results were exceedingly good. Hydrotherapeutics is unnecessary with this form of treatment.—*N. Y. Med. Jour.*

THE THERAPEUTIC VALUE OF BORACIC ACID.—Recently much has been written concerning the value of boracic acid in leucorrhœa and in gonorrhœa of the male and female.

The merits of this agent have been long recognized in ophthalmological practice, and it has been lauded greatly in the treatment of inflammations of the lining membrane of the bladder.

As an antiseptic, its claims are established. It is said to possess no value as a germicide.

A three per cent. solution is the one usually prescribed in all departments. In weaker solutions than this its antiseptic effect is said to be not so marked. Its use in the treatment of nasal catarrh is also worthy of mention. We have prescribed it in this condition in the strength of a teaspoonful of the powdered acid to a pint of warm water. Three or four tablespoonfuls of this are to be poured into each nostril two or three times a day. We often prescribe it in this condition also in the following combination:

R—Cocaine hydrochlor,	gr. ij.
Acidi boraci,	gr. xv.
Listerine,	ʒj.
Aquæ destill,	ʒij.

M. D. Sig—Use as a spray for the nose morning and night.—*Gaillard's Med. Jour.*

ON REVACCINATION.—Dr. G. Somma is an enthusiastic partisan of vaccination and recommends energetically the introduction compulsory revaccination in this country. Taking into account the whole foreign and Italian literature on the subject, he formulates his view in the following sentences.

1. The protective effect of vaccina against small-pox is indubitable. 2. This effect is limited