

I allude to ipecacuanha. Not only in cases of rigid cervix, where possibly it might be considered to act in a similar manner to antimony, but in cases of simple inertia, in either first or second stage, it is a potent instigator of uterine contraction.

In the course of general practice extending over many years I invariably carried a bottle of vinum ipecacuanhæ in my midwifery bag, and rarely, if ever, gave a dose of ergot in the first stage of labor. Time after time on coming to a confinement case where the pains have been feeble and inefficient, or had totally ceased, two or three 10 or 15 minim doses of the wine at intervals of ten minutes have been followed in a surprisingly short time by energetic uterine action, with a rapid termination to the labor. It never produces the quasi-tetanic contraction so often met with as the result of ergot, the pains continuing to recur regularly, just as they do in natural labor, but with greater force and at shorter intervals. Conviction of the value of the drug for this purpose induces me to give my experience of it, believing that its merits will be recognized by any who choose to give it a trial.—*Brit. Med. Jour.*

FRACTURES OF THE FEMUR IN CHILDREN.—Much use is made here of perpendicular extension in treating fractures of the femur in children. The ordinary plaster strips are bandaged to the limb, but instead of the cord which attaches the weight passing horizontally over a pulley at the foot of the bed, it passes perpendicularly over one directly above the patient's pelvis, thence horizontally to a second, and then to the weight. This latter is just sufficient to raise the buttock of the affected side clear of the bed. The whole limb and half the pelvis is thus swung at right angles to the trunk. This defecation can be easily managed and perfect cleanliness secured. No coaptation splints are employed, and no device for preventing rotation. It is found that a muscular equilibrium is quickly established, which prevents inversion or eversion. Results are excellent.—*Correspondence in Med. Rec.*

SULFONAL FOR NIGHT-SWEATS.—(*Therap. Monatsschrift; Memorabilien*). Boettlich gave a woman, eighty years of age, four grains of sulfonal as an hypnotic. After using one powder she asked him if its virtue consisted in the abatement of night-sweats. She suffered so profusely from this trouble that she had been compelled to change her linen twice every night. After the fourth dose of sulfonal great improvement was noticed. Further observation proves to the writer that 0.50 (seven and one half grains) was generally successful in the prevention of night-sweats. Boettlich thinks its effects equal to those of atropine, and it possesses the advantages of freedom from disagree-

able after-effects. It retains its power, as he finds that the night after taking a dose the sweating is decidedly less.

WHERE TO PUNCTURE IN PARACENTESIS.—Prof. Keen selects the following points for the passage of the needle in the operation of paracentesis. In paracentesis thoracis the place of election is between the eighth and ninth ribs in the line of the axilla. In paracentesis abdominis the needle should enter in the middle line, the patient being in a sitting posture, and the bladder having been previously emptied. paracentesis pericardii the patient should be in the recumbent posture, and the needle should enter at the fifth interspace in front, due regard being had for the heart and large vessels.—*Col. and Clin. Rec.*

TREATMENT OF LARYNGEAL SPASM.—The treatment of spasm of the glottis is often difficult and uncertain in its results, but Sir Morell Mackenzie writes that by setting up a rival reflex the laryngeal spasm may be instantly overcome. The patient need only take a pinch of snuff or black pepper into the nostrils, or if neither can be obtained, the nares should be tickled by a feather. The immediate result is a paroxysm of sneezing, after which the breathing is relieved.—*Hospital Gazette.*

I. N. LOVE, M. D., Professor of Diseases of Children, Marion-Simms College of Medicine, and editor of the *Medical Mirror*, says: The subject of uterine disease reminds me that during the past six months I have had my attention drawn to a remedy which goes under the name of DIOVIBURNIA. I was not familiar with the component parts, but having read the emphatic endorsement by Drs. J. B. Johnson and L. Ch. Boisligniere, of St. Louis, two of the most eminent professors and practitioners of the city, as well as that of Dr. H. Tuholske, I was induced to give the compound a fair and thorough trial, and I am convinced that in DIOVIBURNIA we have a valuable addition to our armamentarium in the battle against the enemies of the noblest work of God—Woman.

JOHN MUIR, M. D. Member College Physicians and Surgeons, Ontario, Canada, Ex-Vice-President Ontario Medical Council, says: "I take pleasure in saying that I have found Papine (Battle) prompt, efficacious, and—better still—unobjectionable as to after effects. A patient, more than usually intolerant of other preparations of opium, has borne it well, and derived manifest benefit from its use."

THE world do move! England is beginning to ask why she cannot have lavatories on her railway carriages.