

HYDRASTIS CANADENSIS IN GYNECOLOGY.—Dr. Schatz, of Rostock, read a paper on the above subject at a recent meeting of the German Gynecological Society.

He is of opinion that the medicinal treatment of the diseases of the female sexual organs has been crowded too far into the back-ground by the operative treatment; that now-a-days the knife is not rarely resorted to in cases in which favorable curative results could be attained by less formidable measures. The author thinks that, especially in functional disturbances of the uterus and ovaries, in menstrual anomalies, direct or reflex nervous, or even congestive troubles, medicinal treatment ought to be tried if the difficulties are but moderate, if an operation is dangerous or mutilating. He calls attention to the fact that often accidental changes in the mode of life, of the climate, psychical alterations, nervous irritations, and finally medication prescribed for other purposes are followed by obvious and unexpected changes in the affections named.

With this view, S. experimented with Hydrastis. He used the fluid extract in about fifty cases. Two-thirds of these were utilized in estimating the value of the drug. In general, it seems to act on the mucous membranes by exciting their vessels to contract. In the female genital apparatus, it seems not only to diminish the blood supply of the mucous membranes, but to act on them as a whole. It is remarkable that the remedy is often effective in cases in which ergot has failed or even has rendered the symptoms worse.

Favorable results were obtained by S. mainly in metrorrhagias due to myomata (ergot had long been used in vain), in hæmorrhages in the puerperium, in menorrhagias of young persons from fifteen to eighteen years of age, finally also in those forms of endometritis in which curetting had failed. In most cases, he commenced the use of the drug one week before the onset of the menses; where the catamenia recurred with undue frequency, even longer previous to the normal date of their appearance. In several cases, the flow became not only less profuse and shorter in duration, but several times it failed to set in altogether. In the case of myomata, too, the hæmorrhages disappeared often for months. The incidental effects of the drug generally were only agreeable in their nature. Particularly noticeable was an increased appetite. Once only a certain lassitude occurred; in another case, states of exaltation. The dose of the fluid extract is about twenty drops three times a day.—*American Journal of Obstetrics*.—[It has also been highly extolled in the treatment of dysmenorrhœa.]
ED. LANCET.

SALICYLIC ACID IN CEREBRO-SPINAL MENINGITIS
—Dr. D. C. Ramsey, in an article in *St. Louis Courier of Medicine* concludes as follows:

1. The analogy existing between rheumatism and cerebro-spinal meningitis would suggest and be good reason for the use of similar remedies in both diseases.

2. Salicylic acid being the best remedy, almost a specific in the treatment of acute articular rheumatism, would be a strong indication for its use in cerebro-spinal meningitis.

3. It produces marked reduction in the temperature; the fever being thus lowered, the tissue-destruction and the onward progress of the inflammation is checked, thereby giving the patient rest.

4. It controls the intensely annoying metastatic pains of head, back, elbow, and knee, giving the patient ease.

5. It exerts a direct influence for good over the inflammation itself, and can be taken in frequent large doses without bad effect; having given a boy fifteen years of age half-drachm doses every four hours for three or four days, with the only result of a great benefit in all the symptoms connected with the disease is, I think, conclusive evidence of its harmlessness.

6. Its good effects are soon apparent, and it does not interfere with the use of other measures of relief, as ice, blisters, etc.

7. The best mode of using the remedy is to administer large doses frequently. For adults begin on doses of fifteen grs. repeated every two hours, and increase the dose as may be found necessary to obtain the desired effect, to ℥ ij., at intervals of two hours, if need be. When the disease is under control, which will be determined by the reduction in temperature, relief of pain, and placid countenance, decrease the dose, give at longer intervals, but still continue the use of it in small doses as long as the least symptom is present indicative of the disease.

Having never read or heard of salicylic acid being used in the treatment of cerebro-spinal meningitis, and my good success with its use in this fearful epidemic being afterwards verified by Dr. J. B. Weever, of this place, I hope to induce others to give this remedy a trial, and by so doing I think they will be enabled to see very happy effects from its use, and thereby be highly gratified with the results.

SORE THROAT IN CHILDREN.—Dr. Henry Ashby, (*Practitioner*,) mentions four principal varieties:

1. Simple tonsillitis. 2. Scarlatinal tonsillitis. 3. Pseudo-diphtheritic. 4. Diphtheria.

Weakly and scrofulous children are especially subject to the first. It is oftener seen as a complication of alimentary disorders, as those of liver and stomach, than of the respiratory tract, as bronchitis and laryngitis. It frequently precedes rheumatic attacks. It may be the result of the scarlatinal poison. In proof of this he cites an interesting series of eight cases occurring in a hospital