treatment of syphilis in its different stages, were raised by Köbner, Haslund (Copenhagen), Leloir, and others, but no new lights were thrown on this rather threadbare subject.

Leprosy.—In the afternoon, Mr. Jonathan Hutchinson opened the debats on leprosy, which proved the most animated and interesting throughout the week. He announced his entire acceptance of the ba illary theory of the etiology of the disease, and once more enunciated his well-known "fish theory," supporting it by numerous cogent and well-arragned facts, and by much persuasive eloqeence and plausible reasoning. Various considerations opposed to Hutchinson's views were adduced by Arning, Petersen (St. Petersburg), Schusler, and Kaposi. Dr. Leloir expressed himself as totally opposed to the "culinary" theory, and on the assumption of its contagious nature, as in favour of the establishment of leper colonies. Dr. Abraham asked for some explanation of the now notorious Dublin Cave, and advocated the claims of the National Leprosy Fund. Mr. Hutchinson's reply was able and characteristic.

Pigmentations of Skin.—A tedious and barren discussion on the pathogenesis of pigmentations and discolorations of the skin occupied the forenoon of August 7th. In it Drs. Caspary, Kaposi, Ehrmann (Vienna), Jarisch (Innsbruck), Kromeyer (Vienna), and Blaschko took part. The only general deduction to be drawn was that direct nerve influence is now considered to be a much less important factor in the etiology of abnormal pigmentation than was formerly maintained.

Lichen Ruber Acuminatus.—An interesting and exaustive paper by Dr. Adole Havas (Budapesth) on the so-called lichen ruber acuminatus of Hebra citing two cases, resulted in the admission by Dr. Neumann (Vienna) of the identity of the disease with the pityriasis rubra piliaris of Devergie, the existence of which as a morbid entity was accepted by the great majority of dermatologists at the Paris Congress of 1889, and must now be consideaed as fully established.

A writer in the *British Medical Journal* suggest that a pencil or stick for application to chafed and irritated surfaces, or to skins especially susceptible to insect bites, etc., may be made by adding two per cent. of cocoaine to the ordinary cocoa butter pencils, giving immediate relief when rubbed over the spot.

M. Loison (*The Lancet*, June 21st), has devised a simple plan for detecting terpin in the urine in very small quantity, based on the fact that this substance, when treated with hydrochloric acid, evolves a hydrocarbon which colors chloride of antimony red.

Dr. J. William White (*Medical News*, June 14) recommends the following mixture in capsules, for the treatment of acute urethritis:—

Salol,	gr. iiiss	
Oleoresin of cubebs,	gr v	
Balsam of copiava (Para),	gr. x	
Pepsin,	gr. j.	M.

The discharge, in two-thirds of the cases, ceased within a week. In the majority of cases he also recommended an injection of gr. ij-x of sulphocarbonate of zinc in a 10 to 15 per cent. solution of peroxide of hydrogen.

CHOLERA INFANTUM.

Twenty deaths last week from cholera infantum, and sixty-eight from other affections of the gastro-intestinal apparatus, warn us that the summer is here and the annual slaughter of the innocents has commenced. Although there have been radical changes in the current views as to the pathology of this group of diseases, the effects upon the annual mortality are not as yet very marked. Therapeutic applications have been made, but have not as yet been generally accepted by the slow-moving body of the profession. Two ideas are to be kept in mind concerning the summer diseases of children; intestinal asepsis and the regulation of the diet. It is instructive to glance over the pages of the older text-books, such as the earlier editions of Meigs and Pepper, and note the blind floundering of the therapeutist before the development of the germ theory and the researches upon ptomaines gave us a definite working theory. The intestinal canal of the infant is a breeding ground for countless microzymes, good, bad, and indifferent, which carry on their operations unceasingly; when the combined influences of tropic heat, bad hygienic surroundings and unwholesome food lower the vital forces of the child to a certain point, these organisms, or their toxic products, pass through the ungarded portals and manifest their presence in the body by their appropriate effects. The first indications of abnormal action in the intestinal canal, undue fetor, fermentation or diarrhœa, should be promptly met by the administration of such substances as will correct the difficulty and put the primæ viæ in the state of asepsis. A number of agents have been employed for this purpose, and good results have been reported from resorcin, naphthol, mercury, salicylic acid, subiodide of bismuth and solol. It is quite natural for the physician who has experienced the great benefit of intestinal antisepsis to become partial to the agent which has first afforded him this great advantage over his previous practice. Nevertheless, there is one of these agents which must be better, taken all in all, than the others, and the best is the sulpho-carbolate of zinc. It is free from the unpleasant taste of some, the irritant qualities of others, the toxic possibilities of others; it does not interfere with the digestive functions, and it is at least equal in efficiency to all its rivals. It possesses all the advantages, and no disadvantages. In the gastric cases it relieves the vomiting at once. In dysenteric cases it may be injected into the bowels with the best results.

For children, the sulpho-carbolate is best given in doses of one-half to two grains, repeated every one to four hours; the frequency being regulated by the effect upon the stools, and the