

dose every half hour till the severe bleeding stops, and continue it later, in the dose of one or half a teaspoonful three times daily, until all signs of the spitting of blood have disappeared. I have seen no remedy yet so certain in its effect as hamamelis, and I mention it here to induce others to try it. If hamamelis is used in the following way, patients like to take it:—

R. Extract. hamamelis, fluid,	f. ʒ iij	
Tinct. radiceis aconiti,		
Acid. hydrocyanic., dilut.,	aa	℥ xv
Extract glycyrrhiz, fluid,	f. 3 ss	
Syrup. limonis,	f. 3 vij.	M.

SIG.—One or two teaspoonfuls, in water, three times daily, or as directed.

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TREATMENT OF PUERPERAL AND OTHER HYPER-PYREXIAE BY COLD.

Dr. Wiltshire (*British Medical Journal*, May 18, 1878), gives notes of two cases of puerperal hyperpyrexia treated by means of dry cold,—the patients being surrounded in their beds with bottles, etc., filled with ice. This reduced the temperature for the time being, usually, but not invariably. The relief experienced by the patients was at times great and palpable, but they could not sleep during the applications, possibly because none were made to the head. Dr. Wiltshire prefers the dry packing as obviating the necessity of removal from bed. In the same number of the journal, Dr. Waters gives an account of a case of acute rheumatism and one of typhoid fever successfully treated by cold baths.

A PHYSIOLOGICAL HINT TO PHOTOGRAPHERS.

Discomfort, amounting in many persons to actual distress, is experienced in sitting for a photographic portrait. The eye is fixed on a certain spot, and, whilst staring at this, vision becomes indistinct, surrounding objects especially being lost in a thickening mist. A feeling of giddiness, and even of faintness, is apt to follow if the sitting is at all prolonged. Whilst undergoing an ordeal of this kind the idea was suggested to Dr. Buzzard (*Lancet*, April 20) that a diagram of a clock-face some four inches in diameter, and posted about eight feet in front of the sitter, would be a more agreeable object to look upon. He tried the experiment, allowing his eye to rest first upon the figure XII, then upon I, and so on around the circle. While this slight change rested the eye, and preserved the brain from fatigue, the photographer found that it produced no indistinctness in

the picture of the eye, even the iris being well defined. It is evident that the plan described is likely incidentally to prevent to a great extent the staring expression which the face assumes when the gaze is long fixed upon an object, for it combines a certain amount of free play of the eyes with accuracy of photographic definition. Dr. Buzzard says, "A somewhat larger circle, I have no doubt, may be employed with even greater advantage; and printed words, pictures, or other objects may replace the figures. For children, and others who do not easily follow directions, a disc with a single aperture towards its edge might be made to revolve, in the direction of the hands of a clock before another disc prepared with pictured objects of some kind or other, so that one would appear at a time at short intervals of space, and attract the eye. Various other modifications indeed, at once suggest themselves as feasible; so long always as the figure towards which the gaze is directed presents a succession of objects arranged in a circular form."

NASO-PHARYNGEAL DISEASE—IODOFORMED WOOL.

In diseases of the nose and post-nasal region the curative influence of iodoform requires to be more extensively known. In cases of rhinitis, ozæna, post-nasal catarrh, and hyperplastic deposits, whether simple or syphilitic, iodoform exercises quite a specific influence. As regards the best method of using it topically in these sensitive regions, the objection to the ethereal solution is its extreme painfulness. This defect—a very serious one in the case of delicate females—is due entirely to the solvent employed, iodoform itself having a distinctly anodyne influence on the tissues to which it is applied. Allowing the ether to evaporate somewhat from the sponge or brush employed modifies its unpleasant effect; but even then I have observed patients shrink from its application with expressions of the greatest dismay. I have, therefore, sought for some vehicle for iodoform which, while free from the objections due to the ether, will enable to drug to be maintained in contact with the tissues to be influenced by it. Finely, carded cotton wool appears to supply this requirement; an "iodoformed wool" has been prepared for me by Messrs. Bullock & Co., which has yielded very satisfactory results in practice. Each drachm of the wool contains a drachm of iodoform, with which it is very intimately blended. For use it is simply necessary to pass on a probe a small portion of the wool to that part of the nasal cavity which may be diseased. Here it will remain for a period varying from one to twenty-four hours, its presence being unrecognized by the patient.—*Dr. E. Woakes, Braith. Ret., No. 77.*