

dle of the upper lid, or scarification, I deem harmful and entirely unnecessary.

BISMUTH SUBNITRATE IN FŒTID PERSPIRATION OF THE FEET.

Viéusse recommends the subnitrate of bismuth in the treatment of fœtid perspiration of the feet, and concludes as follows:—(1) Profuse perspiration of the feet, whether accompanied by pain or fœtidity, is easily cured by the application with slight friction of subnitrate of bismuth upon the diseased parts. (2) In opposition to the opinion generally held, according to which the suppression of exaggerated perspiration may produce numerous accidents of metastasis, observation shows that the cure of this affection has not been followed by unfavorable results, and that if these are observed they should be attributed to other methods of treatment hitherto employed. (3) In the cure of this disease, subnitrate of bismuth appears to exercise a purely local action, rendering the superficial cuticular structures firmer and more resistant. The remedy, perhaps, exerts an action also upon the sudoriparous glands and sebaceous follicles, changing the quality and quantity of their products, and, possibly, as a result of the changes produced in the part with which it comes in relation, modifies more or less profoundly the capillary circulation. (4) In certain cases the remedy suppresses only temporarily the profuse perspiration of the feet, but causes the fœtid odor, as well as the pain, which is the consequence of the exaggerated secretion, to disappear permanently. *Rivista Internazionale de Medicina e Chirurgia.*

SPASMODIC ASTHMA—ITS TREATMENT.

This young lady is troubled with cough and shortness of breath, spells of which come on suddenly during the night. She has suffered from this affection for four years, and the attacks show a tendency to recur on Saturday nights. She is very liable to catch cold, and she is then more apt to suffer with the shortness of breath. I learn that several members of this young lady's family are affected in the same way. She is suffering, as you would infer from this history, with spasmodic asthma. When the spasm is not present, nothing abnormal is heard on auscultation. If, as often happens, emphysema or bronchitis coexists with the spasmodic tendency, the signs due to these conditions will be found. During the existence of an attack there would be found wheezing and whistling sounds.

I shall make this case the basis of a few remarks on the treatment of spasmodic asthma. The man who has studied asthma more thoroughly than perhaps any other is Hyde Salter, whose work on asthma contains all that is known about this disease. It is like Anstie's work on neuralgia—a complete text-book on the subject. Salter says that every case of asthma has a climate which will cure it,

provided we can find that climate. We have no means of judging beforehand what climate is going to cure any particular case, but in the majority of instances, the dusty, dirty, smoky air of the city is better for asthmatics than the pure air of the country. If we can find the appropriate climate the patient will be free from his asthma. It might also be said that in the majority of such cases as this, of hereditary, spasmodic asthma, unless we can find the appropriate climate, the patient cannot be cured.

Apart from the consideration of climate, the treatment of asthma divides itself into two parts, which are essentially distinct: first, the treatment of the paroxysm; and second, the treatment to prevent the recurrence. In the treatment of asthma, always use single remedies, for asthma is peculiarly a disease which is helped by single remedies; that is to say you will find certain cases that will obtain relief only from tobacco; and, again, cases will be found that are relieved by lobelia, and by nothing else. It would be folly to give a prescription containing both these drugs when only one is going to be of service.

In the treatment of the paroxysm, almost anything will succeed in some cases, while there are others in which nothing affords relief. It would take more than the time which we have at our disposal to enumerate all the drugs that have been successfully employed to relieve a paroxysm of asthma. Tobacco is one of the very best, and, in the present case, the attacks have been relieved by smoking a cigarette. There is, of course, a great likelihood that a patient using tobacco for this purpose will acquire a fondness for the weed; but a person who uses tobacco to stop an asthmatic attack must not use it at other times, or it will lose its effect. There is one exception to this rule, and that is, that in some rare cases habitual smoking prevents the recurrence of the attack, and as long as the patient smokes two or three cigars a day, he will be free from the asthma, but as soon as the tobacco is stopped, the paroxysms recur. Sometimes a few whiffs of the cigar will stop the attack; but, as a rule, smoking must be continued until poisonous effects begin to be manifest, in the depressed circulation, the cold sweat, and the nausea, perhaps with vomiting. In most cases this is a harmless remedy, but where there is feebleness of the heart, tobacco must be avoided.

Lobelia closely resembles tobacco in its action, and my remarks with reference to the latter drug would equally apply to lobelia. This, however, helps some cases in which tobacco fails, and fails in some cases that tobacco relieves. A common remedy is the smoking of stramonium leaves. These may be made into cigarettes, either with or without tobacco, and have been found of service. In the same way the leaves of hyoscyamus, and belladonna have been found of value. Probably the remedy most frequently used is salt-petre paper. A saturated solution of the potassium nitrate is prepared, and in this is steeped blot-