

tration, and the fact that once the patient is anesthetized the operator can put all his attention on the operation, and does not have to watch the anæsthetic. It would thus be of great value where the physician is alone, and experimenters say that there is no reason why cocaine analgesia cannot be as well employed in private practice as in the hospitals. The expense saved would be considerable, as a physician's ether and chloroform bill, especially one who does much operating, is a very considerable item, and then, too, the services of an anesthetist can be dispensed with.

What vomiting there is, the patient is conscious of, and there is not the danger that occurs in ether and chloroform narcosis of the trachea or larynx becoming blocked by the vomitus.

What is known as inhalation or ether pneumonia, is by the use of cocaine done away with, and thus another remote effect of the old anesthetics removed.

Finally, there is the testimony of many patients who have been operated on under both ether and cocaine that the latter is much the less disagreeable of the two.

Summing up, then, the general consensus of opinion seems to be, as Bier says in his latest paper on this subject (*Centrallblatt f. Chir.*, July 20, 1901), that it is at least as dangerous as the general narcotics, and perhaps even more so, and in its results even more unpleasant. And, again, that spinal analgesia is not yet perfected, and needs improving and further investigation, before being generally adopted. Nevertheless, he believes that it has a future. Tuffier, perhaps its strongest advocate, says (*Semaine Med.*, December 12, 1900.) Analgesia by this means bears comparison with general anesthesia. Whether it should replace it, the future will show.

Phelps, of New York, (*Phil. Med. Journal*, November 3, 1900) admonishes the profession to advance with great caution, and says that only when it can be shown that death from this form of anesthesia is less than 1 in 75,000, will we be justified in abandoning ether for cocaine.

He also states as his opinion, that if a 2 per cent. solution of cocaine were injected into the spinal canals of 1,000 persons, taken indiscriminately, the mortality would be greater than 1 per cent.

In some cases there can be no doubt but that it is indicated, as in operable cases, where ether and chloroform are absolutely contra-indicated.

An editorial in the *Medical News* for October 13, 1900, says that it should be our object, not to employ medullary narcosis as first described, but using this as our starting point, to take means to render it harmless and to extend its action to all parts of the body.