

The Risks of Infection in Railway Cars.—An illustration of the dangers to which those are exposed who are compelled to use public conveyances, as well as of the necessity of adopting suitable precautionary and corrective measures, is furnished by a recent investigation conducted by Dr. Petri, of the Imperial Sanitary Bureau of Berlin, who found that of ninety-one animals inoculated with material, principally expectoration, obtained from the interior of railway carriages, nearly one-third died as a result, while of the remainder, several on being killed were found to have become tuberculous. In those that had died in consequence of the inoculation, staphylococci and streptococci were the organisms principally found. Tubercle-bacilli had previously been found by another observer in the dust from railway carriages. Indiscriminate expectoration should be rigorously forbidden, particularly in public places and in public conveyances, and infraction of this rule should be adequately punished, at least by fine. While we may not hope entirely to eradicate transmissible diseases, the observance of a few sensible regulations will go far to diminish their prevalence and restrain their spread. To this end let us make and keep ourselves and our surroundings, together with the air we breathe and the water we drink, as clean, as aseptic as possible.—*The Philadelphia Medical Journal.*

Local Anesthesia by Tissue-Exsanguination.—Oberst induces local anesthesia by the combination of cocaine in small amount and the elastic tourniquet. Dr. Kofmann, of Odessa, effected it without cocaine. A tourniquet was applied round the upper arm in a case of ganglion. When the skin had been sterilized the hand was of a death-like pallor and insensitive to touch or pain, so that the ganglion was dissected out without the patient's knowledge. A second patient was a woman with a needle embedded in the hand; a deliberate dissection was carried out with a like freedom from pain. A series of cases of abscess, whitlow, etc., were treated with similar success. If the patients could not see it, they did not even know when the operation was performed. Complete anesthesia depends on the thoroughness of the elastic constriction of the vessels, and on a sufficient interval being allowed to elapse after the application of the tourniquet. In operating on the fingers or toes, Dr. Kofmann has found it better to apply the constrictor above the wrist or ankle, as he has seen gangrene from applying it to the base of the finger or toe. It is applicable to any operation below the elbow or knee. For the thigh, upper arm, trunk and head, he employs Schleich's method of local anesthesia, and has reduced the use of general anesthetics to a minimum.—*Edinburgh Med. Jour.*