

before the operation is commenced. After the trachea has been reached and the incision made into it, the knife should be retained within the trachea, and the blades of the Dilator inserted by slipping them in alongside of the blade of the cutting instrument, which thus acts as a director for them. This done, the knife may be withdrawn and the blades of the Dilator separated to a proper distance. Should the wound become clogged at any time, the blades may be farther separated, which will dilate the trachea and cause the obstructing material to be coughed out, or, it may be removed by the forceps or other suitable instrument.

RESORCIN.

The *Centralblatt für die ges. Therapie*, contains the following observations concerning resorcin by M. Ihle, of Leipsig, reported by Jarisch. The specific antiseptic properties of resorcin can be best noticed in herpes tonsurans. After two or three applications of a strong resorcin ointment the inflammation is allayed, and if the plates of epidermis tanned by the resorcin are removed, it will be found that only in those hairy regions where the spores have made their way to the bottom of the hair follicles is it necessary to continue treatment.

A very great advantage in the treatment of parasitic sycosis with resorcin is that the beard need not be epilated, the hairs loosening of themselves under the treatment. The pastes used should be applied two or three times a week, thickly with a brush, and rubbed well into the parts, which are then to be covered with cotton. It is at all times well for the physician to apply the preparation himself, and increase the strength with the progress of the cure. For instance, if the first application is a 10 per cent. paste and causes no great irritation, the next may be of 25 per cent. and the strength may be thus gradually increased to 50 or 80 per cent., then when the pus formation and irritation begin to decrease, applications must be continued in decreasing strength, following a similar scale.

As spores may still exist in a case of apparent cure, it is advised to give the patient a 3 per cent. salve to apply at first daily, and later on, once or twice a week. Now, for the first, should shaving be permitted, because in the energetic treatment with resorcin, shaving should be absolutely forbidden on account of the irritation which it causes.

The following ointments are recommended :

R.	Resorcin purissim.	10
	Vasellini albi	50
	Amyl Oryzæ,	
	Zinci Oxidi	aa 25
M.	ft. past.	

With an increase in the amount of resorcin, it

is necessary to decrease proportionately the zinc and starch. Therefore for stronger ointments, the following is used :

R.	Resorcin puriss.	50
	Vaselin. albi	60
	Zinci Oxid.,	
	Amyl. Oryzæ	aa 20
M.	ft. past.	

The author speaks of resorcin in the treatment of pityriasis vesicolor and eczema marginatum as being attended with absolutely sure results. He also recommends it in the treatment of alopecia areata and seborrhœa cum defluvio capillorum.

For these he uses :

R.	Resorcin puriss.	5.10
	Ol. Ricini	45.
	Alcohol	150.
	Bals. Peruv.	0.5

M. S. Apply daily to head with a flannel rag.

The itching of the seborrhœa is said to cease entirely under this treatment. Condylomata acuminata treated with an eighty per cent. resorcin salve, daily applied, quickly disappear. It is well to apply a five to ten per cent. salve for some time afterward to remove the tendency to their redevelopment. Dr. Ihle does not approve of the application of resorcin to eczema and other inflammatory skin diseases, because of its irritating properties. Dr. Unna, however, in a pamphlet upon Ichthyol and Resorcin (Hamburg and Leipsig, 1886), recommends a five to ten per cent. ointment in the treatment of seborrhœic eczema resulting from alopecia areata, and prefers it to ichthyol or pyrogallie acid.

He mentions as a special advantage its lack of color and freedom from staining. In psoriasis its action is not so favorable, but for all dry, scaly eczemas of the face he recommends it. On account of the difficulties of diagnosis in skin diseases of the face, he advises that the drug be discontinued the moment it is noticed that no improvement is taking place. In scars or pitting from variola, traumatism, acne, or other cause, and in false keloid he has found it of benefit, but its advantages over ichthyol and other reducing substances lies wholly in the fact that it does not produce discoloration and does not inflame the eyes as does chrysarobin, although under certain circumstances the latter drugs have preference. Dr. Unna declares himself quite convinced that in acute exanthema, and especially in scarlatina and variola, resorcin is destined to play a very important part.

In chronic skin diseases its use must remain limited to external application.—*Journal of Cutaneous and Venereal Diseases.*

THE DIETETICS OF PULMONARY PHTHISIS.—Dr. Loomis (*Jour. of Reconstructives*) gives the following rules for the dietetic treatment of phthisi-