signs were first noted; and until statistical inquiries remove all doubts as to the cause of the peculiar symptoms observed in the last two cases, to try tartar emetic whenever they present themselves. Meanwhile let us learn that in the early stages of other fevers than typhus, congestion of the lungs may lake place, and that from the diminished sensitiveness to the want of air which probably all fevers produce. Such a condition may be unknown to the patient, and not marked by the symptoms always observed, when there is no specific fever to mask them, and therefore, that in all fevers we should examine the lungs daily.

## THERAPEUTICAL RECORD.

(Brit. & For. Med. Chir. Review, April, 1853.)

Ascites.—Teissier relates three cases of ascites treated by iodine injections, composed of 60 to 70 grains of iodide of potassium, 7 to 10 drachms of tineture of iodine, in 6 ounces of water. The iodine was rapidly absorbed and excreted through the kidneys. M. Ore has used iodine injections in 5 cases; two were cured; three died, but not from the injection. The first effects were sinking, pallor of face, lowering of pulse, and severe pain; in ten minutes these symptoms went off; subsequently there was heat, pain, fever, some meteorism, colic, and sleeplessness. No important peritonitis, however, ever appeared to come on. The strength used was one part of the tincture to three of a vehicle. The remedy is contra-indicated in ascites, dependent upon heart or liver affection, or when there is kidney disease. When the ascites is from peritonitis, or follows ague, the injection is to be used.

Ague.—Dr Galamini speaks in strong terms of the febrifuge power of sulphate of quinine when combined with equal parts of tartaric acid—a much smaller quantity of the alkaloid so administered sufficing. During an epidemic of ague, it was given in 43 cases, in 31 of which it speedily effected a cure. In 21 of these, half a scruple sufficed, while in 10 others it required more continued use. In most of the cases, there was hyperemia of the brain or bronchial membrane, enlarged spleen, or gastro-biliary derangement, requiring the preliminary employment of bleeding or purgatives. Of the 12 other cases, 5 had relapses; in 3 no effect was produced; in 4 the above named irritative symptoms returned.

Convulsions Puerperal.—Mr. Bolton relates a case in which severe puerperal convulsions, coming on immediately before labor, and unchecked by depletion, were completely arrested by the inhalation of chloroform. Dr. Holst, in a bad case of puerperal convulsions, attended with great rigidity of the os uteri, threw up warm water against the os uteri for six minutes, as in Kiwisch's method for bringing on labor. The os speedily dilated, and labor was completed by the forceps.

Diabetes Mellitus.—Dr. Hanekroth recommends a mixture of sulphate of iron 3 iss. tinct. cinch. c.; aq. menth. ana. 3 vi.; 20 to 30 drops every two hours. In two cases there was perfect recovery. Mr. Sampson states that the permanganate of potash grs. ii.—v. in solution thrice daily, has a marked effect in reducing the quantity of urine in cases of obstinate dyspepsia, and in diabetes mellitus. In a case of the latter dis-