

directing her, on the tenth day after confinement, to sit up the greater part of the day, and for nearly an hour to remain by an open window overlooking a large lot full of decaying leaves, weeds, animal matter, etc.

I was called in on the following day. Among the symptoms which presented themselves, I found over the chest great tenderness and pain on the slightest pressure. I diagnosed this to be due to an irritated condition of the nerves or nerve-endings; and ordered flaxseed, mush and other poultices, one after another, but without avail. The pain still continued. I then gave medicine, belladonna ointment, etc. I exhausted the list without giving relief.

I mentioned the case to my friend, Dr. J. V. Myers, of this city, who advised me to use a poultice of flaxseed and tobacco, equal parts, care to be exercised as to the toxical effects of the latter. I took advantage of the advice. The alleviation of the pain, which before the application was excruciating, was immediate and permanent. The relief was beyond my expectations. On the same patient, this same poultice has on one or two occasions since done equally good and effective work.

Mrs. J. had an attack of perityphlitis. For the pain, I ordered the usual medicines, together with mush and flaxseed poultices. These had no effect. I then had applied the poultice of flaxseed and tobacco. There was an almost instantaneous cessation of the agonizing pain from which, for two days, the patient had suffered.

I cite the two above cases, because I know that there can be no mistake, but that the tobacco was instrumental in doing the good work.

In all instances when a simple poultice does not meet with the success desired, I add tobacco to it, in the proportion of one half. The leaves are the best for the purpose; but the various kinds of clippings in the manufacture of cigars, etc., will answer. The tobacco should be cut up finely, and then well mixed with the flaxseed; the poultice is made in the usual manner. A fine piece of linen, or gauze, is to be placed between the poultice and the body. Care must be taken that the part to which the poultice is to be applied is not denuded of its skin, for the tobacco may, in such a case, give rise to symptoms of poisoning. I think that with ordinary care, there can be no danger; in my hands this poultice has proven of great value.

I would ask that the readers of the *Reporter* employ this poultice when indicated, in the stead of the simple flaxseed poultice, and report their success or failure, as the cases may prove to be. *Phil. Med. & Surg. Reporter.*

NEW TREATMENT OF ABSCESES.

In the wards of Dr. Steven Smith, a new treatment of abscesses has been very successful. When the abscess points it is opened and the contents evacuated. The cavity is then injected with car-

bolized water, and over-distended for two or three minutes. The water is then pressed out, and over the whole area undermined by the cavity, small, dry, compressed sponges are laid and bound down with a bandage. Carbolized water is then applied to the bandage and injected between its layers until the sponges are thoroughly wet, after which a dry bandage is applied over all. The sponges by their expansion make firm and even compression upon the walls of the abscess, and hold them in perfect apposition, thus favoring a union. The dressing is left on for five or six days, unless there is a constitutional disturbance or pain in the seat of the former abscess. It is found, in most cases, when the bandage is removed, that the abscess has completely closed by an approximation of its walls, and the external wound heals readily under a simple dressing of carbolized oil. A case was recently seen where this admirable result was secured in a child, although the abscess was a large one, originating in caries of the head of the femur, and opening on the outside of the thigh. No constitutional disturbance, no discharge, no recumulation, and no pain followed its use. Mammary and sub-mammary abscesses have been treated by this method with excellent results.—*Chicago Med. Review.*

BENZOATE OF SODIUM IN THE TREATMENT OF ACUTE RHEUMATISM.

Dr. David MacEwen (*Brit. Med. Jour.*, vol. i, 1881, p. 336) observing that benzoic acid is closely similar to salicylic acid in chemical composition, and somewhat the same in physiological effects, endeavored to determine whether it, like the latter, possesses anti-rheumatic properties. He publishes notes of five cases in which the remedy was employed in the form of benzoate of sodium. On the first occasion in which he used it, the relief of pain and subsidence of fever were so immediate, and the recovery was so rapid and complete, that he had no hesitation in adopting the same treatment in subsequent cases. The dose was, in the earlier cases, fifteen grains of the salt every three hours; in the later cases, twenty grains every two hours. In all the cases the symptoms passed off in periods varying from three days to a week after the commencement of the medicine; in none did cardiac complications arise in the course of treatment, and Dr. MacEwen thinks the convalescence was more rapid than in cases he had seen treated with salicylate of sodium. Benzoate of sodium possesses this advantage, that it does not give rise to the nausea and depression or the unpleasant head-phenomena which the salicylate frequently produces. It is most conveniently prescribed in the form of a mixture, and it may be given in doses of fifteen to twenty grains every two or three hours. It should also be continued in diminished doses for twenty-four to forty-eight hours after the rheumatic symptoms have disappeared.