

whole surface was much swollen, brilliant red in color, with urticaria in wheals and long ridges. The pulse was between 50 and 60 and very feeble. Vomiting had occurred several times, and there had been one loose passage. The temperature was $102\frac{1}{2}$; the day before, at the same hour, it had been $99\frac{1}{2}$. There was a good deal of nervous excitement and unrest, but no delirium and no hysteria. Opium was given by injection and brandy freely by the mouth. After this vomiting recurred several times, large quantities of greenish fluid being ejected; there were also one or two alarming fainting spells. A little after seven o'clock the symptoms began to subside, and in about five hours the patient returned to her normal condition. This case is made the more interesting by the fact, which I learned after the poisoning, that a brother of the patient had had, on at least two occasions, similar symptoms provoked by quinine. Careful investigation failed, however, to get any trace of the idiosyncrasy in past generations. These rarer peculiar relations of human individuals to quinine must not be confounded with the more frequent disagreeable effects of quinine, some of which are apt to be overlooked by practitioners. The local effect of quinine upon mucous membranes is distinctly irritant, and I have met with many people in whom the cinchona alkaloids produced marked gastro intestinal irritation; so that chronic diarrhoea or gastro-intestinal catarrh have come, in my mind, to be very important contraindications to the use of the drug. The irritating effect of quinine is also often manifested at its point of exit from the body, and the existence of cystitis or conditions allied to it should make the practitioner very careful in the administration of the drug. Some time since I called to see a personal friend, a very eminent surgeon, who was convalescent from an acute inflammation of the neck of the bladder, but who was much prostrated every afternoon by a violent attack of pain entirely out of proportion to the amount of local disease apparently remaining. Finding that the patient was taking quinine freely as a tonic, and that the time of the attack of pain was coincident with that at which quinine was being most freely eliminated from his body, I suggested the disuse of the alkaloid, the result being the immediate disappearance of pain. (Horatio C. Wood, Pro-

fessor of Therapeutics, University of Pennsylvania.)—*Univ. Med. May.*

UTERINE HEMORRHAGE.—Reviewing, somewhat briefly, the subject of uterine hemorrhage, one is impressed, particularly as we take into consideration our gynecological and consultation work, with the necessity of studying each case carefully, and reaching a correct diagnosis as early as possible. When once that has been accomplished, what is to be our line of treatment? Take the case of prolonged hemorrhage in girlhood; the conditions are present, such as we have referred to, a flexion of some sort, a stenosis with enlargement of the body of the uterus, the endometrium is covered with a fungoid growth; small polypi are present; there may be a true condition of endometritis fungosa; perhaps there may be present a distinct polypus. Have we any better line of treatment for these conditions than a thorough, careful dilatation of the cervical canal, complete and thorough curetting, and then, with care, packing the cavity of the uterus with sterilized gauze, dipped or not in a solution of some mercurial or iodoform gauze, thereby maintaining complete and thorough drainage? This is a method of treatment I have followed out for the past five years, enlarging upon it more and more as the degree of safety seems to have become greater, occasionally allowing the patient to wear afterward, for relief of the flexion, an intra-uterine stem pessary. I believe that in all cases where a simple uterine polypus has been removed a thorough curetting should be done, and packing with gauze carried out.—(Van de Veer, from President's Address, American Association of Obstetricians and Gynecologists, October, 1892).—*Brooklyn Medical Journal.*

AMERICAN ELECTRO-THERAPEUTIC ASSOCIATION.—In view of the receipt of a most cordial invitation (which was unfortunately delayed in transit, and hence did not reach the president till after adjournment), it has been decided to hold the third annual meeting of the association in Chicago on September 12th, 13th, and 14th, 1893. The Transactions for 1892 will be published in the Journal of the American Medical Association.