asphyxia from the development of considerable quantities of gas in the intestines, a puncture of the colon at the level of the hypogastric region by means of an exploratory trocar, gave issue to a brisk amount of gas, after which the phenomena of asphyxia ceased, and the patient's life was saved. Such puncture is likely to be of much service in strangulated hernia in order to aid the induction, especially when aspiration is combined with puncture. The views of the learned Professor of Montpelier were assented to by Bouley, Depaul, Siorry, Barthez, Vernouil, and others in the Academy of Medicine of Paris in July last.—*The Doctor.*

HOSPITAL WARDS PURIFIED WITHOUT REMOVING THE PATIENTS.

The exigencies of their own foreign and civil war have made the purification of hospital wards a matter of interest among French surgeons, at a time when so many sick and wounded persons have been brought under their care. We give an abstract of some remarks made by the Editor of *L' Union Médicale,* M. Amédée Latour, on the method proposed by M. Rabot, a pharmacist of Versailles.

The best method of attaining the end in view is, of course, the abandonment of the infected places. But this means is not, at all times, practicable, and then recourse must be had to chemical agents whose purifying and disinfecting powers are more or less efficient. The problem is to obtain freedom from infection in the wards of a hospital without removing the patients or resorting to any other inconvenient method. The solution of this problem has been attempted by M Rabot, in a manner both simple and efficacious

In the first half of 1868, hospital gangrene appeared twice in three of the wards, and the means of disinfection commonly employed signally failed. It then occurred to M. Rabot to make use of oxygen in the infected wards.

"Every evening," he says, "a quantity of oxygen was generated in a large iron retort and, by means of a rubber tube, was thrown into each ward in amount equal to a thousandth part