

the flowers of scaparia until the urine gave no longer an albuminous reaction.

*Cardiac Dropsy.*—We remark in a late number of the *Medical Times* and *Gazette* a revival of the suggestions of Dr. Thénont many years ago as to the diuretic virtues of the common oat. Recent observations have verified these statements, and there can be no doubt that the decoction of oats does possess diuretic properties. The mode of preparation is to take two handfuls of common oats and boil them in a quart of water for a quarter of an hour. Of the strained decoction a cup-full should be frequently given as an ordinary drink. Its simplicity and freedom from injurious consequences recommend it to the attention of the profession.

*Chronic Rheumatism.*—We remark amongst a number of reports sent in to the East India Medical Board, that Dr. Foulis, of Mangalore, gives very favorable results from the use of the fish liver fat as an unguent in chronic rheumatism. Well rubbed in, night and morning, it had the effect of relieving pain and reducing swelling. Dr. Foulis adds: "In cases of atrophu, diabetes and scrofula, fish liver oil has been largely given, and attended with an amount of benefit truly surprising."

*Dia rhea in Phthisis.*—There are often cases of consumption, in which we find irritability of stomach and bowels, inability to retain proper sustaining diet, and obstinate tendency to diarrhœa, to be the most troublesome symptoms met with in the management of that said disease. As a nourishing article of diet, and one which might be used as a substitute to the cod liver oil, which the stomach under such circumstances always rejects, we would propose the emulsion of mutton suet in milk, and flavored with cinnamon. Fresh suet should be chopped fine, put into a bag and gently simmered for a few minutes in the milk, after which a quantity of cinnamon should be grated in. This preparation is always relished by the patient, and the bland and slightly aromatic mixture will oftentimes relieve the irritability, both of stomach and bowels, and add much to the general well being of the patient.

*Fistula Ani.*—An ingenious method of diagnosing in this affection is given by M. Limange, in the *Arch. Belges M.d. M.l.* When the intestinal orifice cannot be ascertained by the ordinary methods of investigation, he suggests that a small quantity of the compound tincture of iodine should be injected through the external aperture of the fistula, while the finger of the operator is retained in the rectum. A permanent stain will thus be produced on the skin of the finger, by which the existence of an internal orifice is proven, and also a very correct idea is afforded of its situation and its distance from the outlet of the bowel.

*Icthyosis.*—Professor Hebra, of Vienna, reports in the *Zeitsch. der Gellsch. der Aertre zu Vein*, two cases of ichthyosis, occurring in boys who had laboured under the disease from infancy. Rubbing with *sapo viridis*, and the use of woollen clothing removed the affection.

*Local Hemorrhages.*—Dr. Bayer, of the Brighton Dispensary, proposes a new form of astringent application, which is worthy of attention on account of its elegance and convenience. We obtain our information from the Association Medical Journal. Dr. Bayer states that pure glyce-