between the menses, attention must be given to dilating the uterine cavity. The sound must be used and left some minutes in situ; or recourse may be had to Simpson's instrument, an extreme means which we are sometimes obliged to employ. We should return to catheterism at certain intervals, even after a cure. In one of my patients you have seen, in fact, the menses disappear some months after the treatment had been interrupted. Simpson recommends dividing the internal oritice, Oldham the external, in the last two kinds of dysmenorrhors. But could

we be certain in every case of arresting the hamorrhage!

The mechanic form of dysmenorrhora is mutigated by catheterism. Does the same good result follow in cases where there is exfoliation of the naucous membrane? Let us say that this last affection is extremely obstinate, and may be considered beyond the resources of art; at least we possess no established or efficacious method. Would it not be benificial to use injections into the uterine cavity of a nature to modify the state of that eavity? Could we not endeavour to diminish the too intense congestion of the organ. A circumstance pointed out by Oldham, and which I believe to be true, is the frequent production of retroversion of the uterus, as a sequela of these kinds of dysmenorrhora,—the chronic inflammations which they occasion giving rise to adhesions and thus to retroversion. If these facts are common, as this author says, and as I believe, it would be a new reason for active interference in the treatment of cases of this kind.

THERAPEUTICAL RECORD.

Diarrhou and Dysentery.—Take of sweet gum bark (liquidamber styraciflua) in coarse powder, five ounces; sugar, 2 pounds; water, a sufficient quantity. Mosten the bark thoroughly with water, let it stand 24 hours in a close vessel, then transfer it to a percolator, and throw water gradually until a pint of filtered liquor is obtained. To this add the sugar in a bottle, and occasionally agitate until it is dissolved. Dose, one fluid ounce after each dejection.

Dysmenorrhaa.—Tinct. of veratrum viride. Begin two days before the expected period and give three drops every three hours, and increase each succeeding dose by one drop until nausea comes on, and then reduce the dose again to three or four drops.

Encuresis. - R ext. belladonn; ext. hyoseyami aa, gr. xvi; saech. alb 31; mist. camph 5 iss. Take a teaspoonful at bed-ime. In obstinate cases the dose may be repeated two or three times in the same night. One case where the disease had continued from early childhood to the age of 17, was permanently cared by a week's use of the above prescription.

Ascandes.—Rousseau .commends, as suppositories: 1, taunin, butter of cocoa, 1 part; ment the butter and mix the powder well ment. Then run it into proper moulds. 2. Biniod microury, 4 centig; butter of cocoa, 4 gram. Melt, mix and mould as above. Also as injections.