

down with tenaculum-forceps, curetted and swabbed out with Churchill's tincture of iodine, and leaving in the uterus a piece of cotton dipped in Churchill's tincture. It will be expelled in a day or two.

For a case of *cystitis* in a woman brought before the clinic Prof. Parvin directed that the bowels be kept in good condition by liquid diet and an occasional dose of sulphate of magnesia, and to wash out the bladder with the following :

R.—Acid hydrochloric, . . . . gr. viij.  
Aqua, . . . . . f 3 viij.—M.

Use as a wash for the bladder ; should there be pain following its use introduce into the bladder the following and allow it to remain five minutes :

R.—Morphinæ sulph., . . . . gr. iss.  
Aqua, . . . . . f 5iiss.—M.

Another good remedy in *cystitis* is creolin 3j. to a pint of water. In obstinate cases astringents must be resorted to.—*Col. and Clin. Rec.*

### COSMETICS FOR THE PHYSICIAN.

The secrets of the toilet, the arts by which lovely woman hides incipient corrugations, effaces blemishes, and softens and beautifies her cutaneous apparatus and its appendages generally, are rarely investigated by the physician. He contents himself with removing some particularly obtrusive mark, pulling out superfluous hairs, or trying, with spirits and Spanish flies, to fasten in the too deciduous hair. Dr. H. Paschkis, of Vienna, however, has attempted to inaugurate a new era in this line, and has written a book, "*Kosmetik für Aertze*," which is intended to enable the physician to add to the æsthetic enjoyment, as well as physical welfare of humanity. Paschkis's book is said by a reviewer in the *Deutsche Medizinische Zeitung* to be a thoroughly scientific one. Its formulæ are based upon dermatological knowledge and pharmaceutical experience. As illustrations we are given four formulæ for that popular domestic article "cold cream."

One of them is as follows :

R.—Lanolin, . . . . . 10.0  
Boracis, . . . . . 1.0  
Aqua rosmarin, . . . . 100.0

M.—Sig.: Lanolin-milk.

A formula for seborrhœa is the following :

R.—Kali carbonat, . . . . . 10.0  
Aqua destillat, . . . . 100.0  
Olei æth. cinamom, . . . gtt. 2.0  
Olei æth. rosmarin, . . . gt. 1.0—M.

For warts our scientific book of beauty prescribes :

R.—Acid salicylicum, . . . . 5.0  
Collodii, . . . . . 20.0—M.

For sweating feet, five to ten per cent. solutions of chromic acid are recommended.

For dandruff and baldness there are, of course, numerous prescriptions ; but, we regret to say, no specific is announced. For a simple wash, as preventive of dandruff, we find :

R.—Kali carbonat, . . . . . 2.0  
Aqua, . . . . . 100.0

The formula for Hebra's dandruff water is also given, viz.:

R.—Spts. æther, . . . . . 100.0  
Tinct. benzoin, . . . . 15.0

—M.

Mouth-washes and tooth-powders are given, the author warning his readers especially against the use of salicylic acid for these purposes.

We have not space to describe the merits of Dr. Paschkis's work in further detail. But it is evident that, equipped therewith, the physician can enter on even terms the contest against the balms of Récamier, the secret washes of Lola Montez, and the roborant lotions of the Sutherland and other sisters.—*Med. Rev.*

### THE RATIONAL TREATMENT OF SCIATICA.

Dr. G. M. Hammond read a paper on this subject. The author considered all cases to be pathologically a more or less mild or severe inflammation of the nerve sheath or interstitial tissue. He agreed with Anstie that rheumatism, gout, and syphilis were not nearly so commonly associated with sciatica as was generally believed. His own experience with the disorder had shown that the vast majority of persons with sciatica had never suffered from these diseases, and that out of hundreds of persons with rheumatism, gout, and syphilis, a very infinitesimal proportion had ever had sciatica. It was very probable that rheumatism and gout lowered the tone of the system to such an extent as to render the patient more liable to an attack of sciatica than he otherwise would be. But, whatever might be the cause of the disorder, it should in all cases be treated as a neuritis. Pathologically, we had to deal with inflammation of the sheath of the nerve and perhaps of the nerve itself, and with a sero-fibrinous exudation, which was usually between the sheath and the nerve, but was sometimes in the substance of the nerve itself. Clinically, there was pain, which might be slight or agonizing, continuous or only present on motion, and, in old cases, there was a certain amount of atrophy of some of the muscles.

For the relief of pain the remedies used should vary with the extent of the suffering. In the severest cases, where the suffering was intense, it