

hours, with which two grains of quinine are included, is beneficial. The ice-bag, or even a mustard and flaxseed poultice, may be indicated for pain. To digitalis much has been attributed, but on the whole it has not been a success. If the heart's action becomes very rapid, with a quick and irregular, soft pulse, it sometimes does good when given in large doses, say fifteen or twenty minims of the tincture ever two hours until two drams are taken, or digitalin hypodermatically, one thirtieth to one twentieth of a grain, has a marked temporary effect in tiding over the patient during a critical period. Ten grains of chloral with four drams of the infusion every four hours gives the patient much relief from delirium and sleeplessness. Objection is made to antipyretics, although sponging the surface with ice-water is recommended. Ammonium carbonate acts as a stimulant and expectorant, but readily disturbs digestion, and must then be discontinued. In progressive cardiac failure, brandy in from six to twelve ounces every twenty-four hours is indicated. In many instances alcohol in any form is not required. Strychnine is a most valuable cardiac tonic, and given hypodermatically in doses of one twentieth or even one twelfth of a grain will sometimes have a miraculous effect upon the heart. His experience with oxygen has not been, on the whole, good. The prophesy is made that the treatment of the future will be the antitoxic treatment, used early, so as to abort the disease by destroying its toxins.—(*Med. Press and Circular*, 1900, No. 3181, p. 417.)

TREATMENT OF PNEUMONIA.

William Porter, in the *Philadelphia Medical Journal* of December 15, 1900, says that venesection should be followed by the injection of normal salt solution in the treatment of pneumonia. The abstraction of blood relieves the right side of the heart, and at the same time gets rid of a certain amount of toxin, and the salt solution increases the pulmonary circulation and the oxygen-carrying power of the blood. The treatment is especially applicable to the lobar form of pneumonia. The writer's deductions are so far largely theoretical, though the treatment has been applied in a sufficient number of cases in the City Hospital in St. Louis to show that it is worthy of more extended study. Bleeding is commonly performed as soon as the diagnosis is