such as the one in question, is often the better of depression, provided it be not secured at the expense of the cardiac centre

mainly.

Cases even so divergent as these do not indicate the whole range of usefulness of the drug. Hare says that it is "certainly of great value in spermatorrhea and nocturnal emissions." Also that it acts mainly on the cerebrum (he might have said the cortical areas), and that "it is of value as a hypnotic only in a very limited class of cases, but in this class generally acts most favorably." These are cases of insomnia due to acute mania, delirium tremens, hysteria, or similar cause—one might say, perhaps, cases in which there is functional overactivity of the higher centres without undue depression of the vegetative centres; for experience in insane asylums has shown it to be injurious to melancholics, and in general paresis, chronic mania, epilepsy, and dementia it is no better than chloral, but is apt by constant use, at least in some cases, to increase excitement. Peterson (N. Y. Med. Jour., October 11th, 1890) found it very efficacious in controlling the tremor of

paralysis agitans.

Objections to the drug are, first, the uncertainty of its action, a peculiarity common to all drugs, the brunt of whose influence falls upon the nervous system. Idiosyncrasy may cause alarming cardiac, respiratory, or spinal depression. Like all drugs from the Atropaceæ, it dilates the pupil, dries up the throat, and if pushed may cause dizziness, delirium, and an erythema of the skin. Some authorities have insisted that it must be given by hypodermic injection, but the writer has seldom so used it, and has been amply satisfied with its action given by the mouth. It may cause croupy breathing, probably from laryngeal dryness, and, in spite of the benefit evident in the case of insomnia from cardiac disease detailed above, it is usually considered less safe than morphia in such cases. Hare says that "the applicability of the drug is very limited indeed, and untoward effects are common." Without pitting a limited experience against Hare's dictum, it seems to the writer that that dictum is too strong, and that the drug is deserving of more frequent use, particularly in meningitis and conditions of cortical over-activity, so long as we bear in mind that its untoward effects are to be found chiefly in the three directions of the cerebration, the circulation, and the respiration.