also give him ten drops tincture digitalis every three hours, partly to control the circulation and partly to act on the secretions. As he still has diarrhea, we will give him a suppository of five grains tannic acid and one grain opium, morning and evening .- Medical and Surgical Reporter.

DIFFERENTIAL SYMPTOMS OF MULTIPLE CERE BRO-SPINAL SCLEROSIS AND PARALYSIS AGITANS:

MULTIPLE CEREBRO-SPINAL SCLEROSIS.

First appearance at the Always after 55 years. age of 20-45 years. Commences with vertigo, uncertainty of gait, psychical disorders, headache.

This is followed by paresis and paralysis, to which later the shaking is added.

Impairment of sight, nystagmus and impairment of speech. Rarely ever, and then

very mild, sensory disturbances. Apoplectiform attacks.

gastric crises. Tremor consists of long oscillations, real shaking.

Shaking only on motion.

Disappears in recumbent position totally. Head always affected. Bulbar symptoms.

Badder and rectum always implicated. Occasional sudden disappearance of all the symptoms for greater or lesser time.

Always fatal.

PARALYSIS AGITANS.

No brain symptoms.

Begins with fine tremor, atter whose existence for some time gradual impairment of motion sets in. No such symptoms.

Always disturbances of

general sensation.

No such symptoms.

Tremor resembling very small, fine oscillations.

Trembling constant, not specially influenced by motion. Does not change by po-

sition. Head never affected.

None. Never affected.

Continuous to death from other cause.

Does not seem to influence duration

life very much. -Medical and Surgical Reporter.

JABORANDI IN PUERPERAL CONVULSIONS .-In a report and analysis of six cases of puerperal convulsions treated by jaborandi, Dr. Fordyce Barker concludes that its utility in the treatment of puerperal albuminuria is more than doubtful, and that after puerperal convulsons its depressing influence and action, which a continuous and exhausting, prevents sleep and the repose of the nervous system, and thus renders it in these cases an unsafe and dangerous remedy.

Surgery.

TREATMENT OF ANGULAR CURVA-TURE OF THE SPINE BY A PLASTER-OF-PARIS JACKET APPLIED IN THE RECUMBENT POSTURE.

BY THOMAS JAMES WALKER, M.D., LOND. Surgeon to the Peterborough Infirmary.

I will now proceed to demonstrate the manner in which I apply it in the recumbent posture; a proceeding for which I claim these advantages. The diseased bones are, at least, as perfectly relieved from pressure, the muscles are as completely relaxed, and the deformity is as much diminished when the patient lies flat on a bed as when he is suspended. conditions are obtained without risk of injury, without terror, distress, danger of syncope, or any inconvenience to the patient; and a perfect jacket fixing the spine in the proper position for cure can be applied by the surgeon in his own consulting-room or in the patient's house, be it ever so small a cottage, without the help of any skilled assistant, and without a splash of plaster on his clothes, or even on the floor.

As I have elsewhere described, I formerly moulded the gutta-percha jackets by using a modification of the many-tailed bandage, and it is only on the same principle that a plasterof-Paris jacket can be applied with the patient in a recumbent posture.

The best lining for the jacket is this closely fitting under-shirt recommended by Sayre. I have used occasionally a flannel bandage applied round the patient, or a sheet of cottonwadding tacked like a shirt round the trunk, both of them being very imperfect substitutes for the vest. The bandage should be of muslin; those I generally use are torn from a piece of Victoria lawn, nine yards long; the width must vary from two to four inches, according to the size of the patient. Plasterof-Paris mixed with water alone, sets too quickly to admit of the necessary proceedings, and we must, therefore, add some material to retard the process of setting; the best, I believe is the ordinary gum, and the materials