copyright of Bromidia. He declares that the decision is not final or binding, and advises the Grosses and druggists generally not to pay any attention to it. Dr. Stewart thus puts himself in contempt of the United States Courts and advises others to place themselves in the same foolish and dangerous predicament. The queer part of the matter, however, is, that every reason which he advances against the validity and justice of the decision is the strongest possible argument in its favor, and the reader must be obtuse indeed not to see that it is so. This view of it was evidently taken by the editor of the *Circular*, who says:—"While giving Dr. Stewart's argument publicity on account of its novelty, we think it proper to remind pharmacists that they are bound by the decision so long as it is allowed to stand"—which advice is good, sound sense, like pretty much everything that emanates from the editor of the journal quoted.—*St. Louis Med. and Surg. Jour.*

THE TREATMENT OF PSORIASIS.—Besneir uses

R.—Naphthol (*b*).	. .	1 part.
Adipis,	. . .	9 parts.

The affected part is to be well rubbed with this salve before retiring, and flannel worn during the night; in the morning a bath of hot soapsuds should be taken.

If no improvement follows after five days of this treatment, pyrogallic acid is used, 5 or 10 to 100. To avoid irritation, friction is employed on small surfaces only, and these surfaces are changed every four days.

For extensive surfaces, Besnier employs a dressing of—

R.—Acid. pyrogallic.

Acid. salicylic,	. .	āā gr. 90.
Ether and alcohol, q. s. to liquefy.		
Add collodion flex.,	.	ʒ 20.

Rev. Gén. de Clin. et de Thérap.—*Med. News.*

ANTISEPSIS OF THE BLADDER AND URETHRA.—At a recent meeting of the French Academy of Medicine, Lavaux read an account of his method of treatment of the bladder and urethra, with the following conclusions: Continued lavage of the anterior portion of the urethra and intravesical injections without a sound, are the most simple and harmless method of genito-urinary antisepsis, which can be employed in all diseases of the urethra. The use of antiseptics and hot injections by this method greatly lessens the danger of accidents in rapid dilatation of the urethra. Rapid dilatation, for simple strictures, is greatly to be preferred, with these precautions, to slow dilatation. Intravesical injections, made without the use of a sound, are quite sufficient to maintain the calibre of the dilated urethra. By these methods the indications for urethrotomy are much less frequent. Divulsion of obstinate strictures is rendered much less dangerous by the method.—*L'Union Médicale. Med. News.*

NEW VAGINAL SPECULUM.

The accompanying illustrations represent a speculum designed by Mr. Butler-Smythe, and made by Messrs. Maw, Son & Thompson, of London. The speculum consists of two slight concave blades of unequal size, hinged together. Fig. 1 shows the instrument open and ready for use: Fig. 2 the same closed. It may be used with the

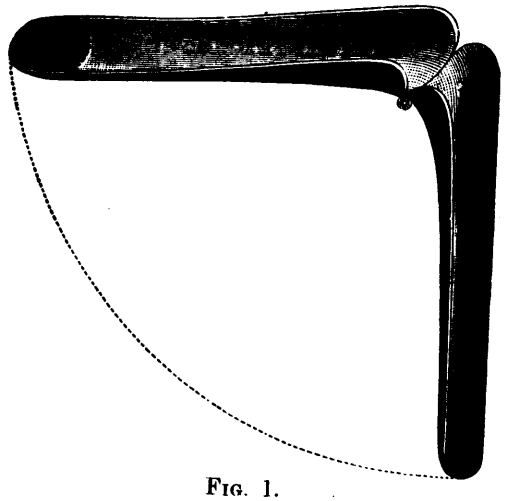

FIG. 1.

patient lying either on her side or back, and, when introduced, one blade acts as a retractor, whilst the other forms the handle. The instrument has been used for some time in hospital and general

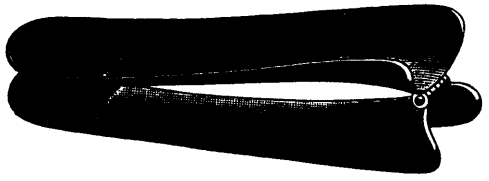

FIG. 2.

practice, and has been found convenient for diagnosis, and useful in cases where the vagina has had to be tampooned or plugged in cases of hemorrhage. Not the least point in its favor is its portability, an important consideration in practice. The blades fold back on each other, and thus enable it to slip into the pocket, where it takes up but little room.—*Brit. Med. Jour.*