

and if milk fails, from two to four ounces of lightly cooked minced meat may be substituted.

For the relief of the pain in both cases, Saundby gives morphia or heroin, but in a recent clinical report Professor Boone, College of Physicians & Surgeons, St. Louis, states that he finds one Antikamnia and Heroin Tablet (5 grains Antikamnia ; 1/12th gr. Heroin Hydrochloride) given as required, not only relieves the pain, but prevents its recurrence, much more satisfactorily than either heroin or morphine alone. In other respects he concurs with Professor Saundby in his method of treatment.

REMOVAL OF GUN-POWDER STAINS.

Dr. E. G. Corbett, of Hampton, Fla., in *The Medical World* of Philadelphia, Pa., Feb., 1902, remarks that Christmas day a boy of twelve filled a vaselin bottle with powder and exploded the same. I arrived on the scene about three hours after the accident and found the cornea and sclerotic of both eyes and the face literally blown full of powder. I removed a dozen or more flakes of powder from each cornea with a foreign spud ; also removed the powder from the sclerotic. Did the operation under a four per cent. solution of cocain. After the operation I used a fifteen per cent. solution of Hydrozone in the eyes. After removing the particles of glass from the face, I kept a cloth over it saturated with a fifty per cent. solution of Hydrozone. At the end of two weeks I used a saturated solution of boric acid in the eyes and painted the face twice daily with equal parts of Hydrozone and glycerin. The eyes are well and powder stains have disappeared from the face.

BOVININE IN SURGICAL PRACTICE.

T. J. Biggs, M.D., Sound View Hospital, Hartford, Conn., reports the following interesting case: Mrs. T., age 47, carcinoma of uterus. Entered hospital October 10, 1901, in a greatly run down condition. She was put on an absolute bovine diet until October 14th, when at one o'clock she was given a high rectal injection of bovine and salt solution, three ounces of each, and at two o'clock, under ether anaesthesia, I performed an abdominal hysterectomy. Just before the uterus was detached from the vaginal wall the patient showed considerable shock, and consequently the nurse was ordered to give her another high rectal injection of bovine and salt solution, two ounces each. She responded to this beautifully. The operation was completed by the closure of the abdominal wound, the pelvis being drained through the vagina. Patient was put to bed with the pulse weak and 112. She was given another