

W A S S A G E

for fifteen minutes and then rubs them for not less than half a minute with a cloth saturated with spirit of soap. Fifteen minutes previous to an operation he places his instruments in the soap bath and either dries them with a sterilized cloth or removes the soap by means of alcohol (50 per cent.) or a sterilized solution of bicarbonate.

DISINFECTION OF THE HANDS.

H. Marx recommends that the aim of disinfection of the hands should be to render them a defective soil for microbes, not necessarily to remove all germs, but merely to prevent their further development. The standard for these conditions is the presence or absence of the Babes-Ernst corpuscles, and this should be the basis of disinfection of the hands.

FORMALIN DISINFECTION.

S. Spengler states that bacilli in sputa are not killed by formalin disinfection as usually performed. His experience at Davos has shown him that complete disinfection is not possible. It is certain if the room is kept at 25° during the disinfection, and if infected substances are moistened thoroughly and give off moisture under the influence of the fumes. The formalin must contain 5 to 4 per cent. of acetic acid.

DANGERS OF CARBOLIC DRESSINGS.

Dr. F. B. Harrington sounds a note of warning against the indiscriminate use of dilute solutions of carbolic acid as a dressing for wounded surfaces. He states that an aqueous solution of carbolic acid (one to five per cent.), if applied to an extremity, as the fingers or toes, for a number of hours, may produce gangrene and total destruction of the part. This result is directly due to the action of the carbolic acid, which slowly penetrates into the deeper tissues, where it acts directly upon the red and white blood-corpuscles, producing thrombosis, and so destroying the nutritive processes of the tissues. Nearly two hundred cases of this kind are to be found reported in recent medical literature, and Dr. Harrington urges the profession to teach the public some safer treatment.

