

is probably due, however, to its usual transitory character and to the fact that it appears most frequently in the third week of convalescence, after the patients have passed from immediate observation. Two adult cases have been reported, but the usual time of its appearance is that of the appearance of other forms of paralysis.

In the cerebral form, which is most grave but less frequent, paralysis occurs preceded by spasmodic muscular movements and exaggerated reflexes. The electrical reactions remain normal, however, and the disease runs a rapid course.

In the spinal variety, on the contrary, the reflexes are rapidly lost, and the electric reactions are much modified, but the course is most frequently benign. It usually takes the form of paraplegia, commencing with formications and cramps, followed by retention of urine and incontinence of feces. Occasionally it is of the ascendant variety, ending in death by paralysis of the diaphragm. Its diagnosis is easy, as it occurs in convalescence from a fever; its course is rapid, from one to six weeks; the spinal form is frequent, and the patient always recovers.

Its pathology is, probably, a congestion caused by a specific bacillary toxine in the blood, which in the grave forms has produced a true inflammation and atrophic sclerosis.—*International Med. Mag.*

PNEUMATIC CABINET IN PHTHISIS.—Dr. Chas. E. Quimby believes, as a result of six years' experience, (*International Medical Magazine*), with the pneumatic cabinet, "that from seventy-five to eighty per cent. of localized tuberculosis, if seen reasonably early in the first stage, can be brought to and kept in a condition of practical cure by the use of the pneumatic cabinet and adjuvant measures other than climate; that cases of disseminated tuberculosis will be arrested in about fifty per cent. of cases, but will require treatment for long periods; that subacute cases may be arrested and made quiescent, when seen first in the second stage, in possibly fifteen per cent. of cases; that third stage cases, if chronic, are always relieved in their rational symptoms and their downward course made easier; while those following acute consolidation are benefited but little, if any, and without care may be made worse. Bronchial hæmorrhages are arrested almost without exception, and frequently do not return, even when the cases progress unfavorably. With rare exceptions all the subjective symptoms are relieved, even when the phthisis is not arrested."—*Med. Rec.*

SUGAR AS AN OXYTOCIC.—In the *Revue internationale de bibliographie médicale, pharmaceutique et vétérinaire* for April 25th, there is a summary of an article on this subject published in the *Semaine médicale*. On the strength of observa-

tions by Dr. Mosso and Dr. Paoletti, as to the action of sugar on muscular power, Dr. Bossi conceived the idea of administering it in cases of defective uterine contraction during labor. He found that it answered the purpose well, and was free from the inconveniences attending the action of ergot. In eleven cases of uterine inertia during labor an ounce of sugar dissolved in water was given, and in ten of the patients it had a most favorable effect on the pains. The ecobolic action of sugar is apparent in from twenty-five to forty-five minutes, and in many cases it is sufficiently prolonged to accomplish the expulsion of the child. In some cases it has been found necessary to give a second dose of the same amount, an hour after the first one, in order to terminate the labor. The contractions excited by sugar are always perfectly regular, and never take on a tetanic character.—*N. Y. Med. Jour.*

THE EFFECT OF ETHER AND CHLOROFORM ON THE KIDNEYS.—Wunderlich, after the examination of the urine in 125 cases, before and after anæsthesia, draws the following conclusions as to the effect of ether and chloroform narcosis on the kidneys:

(1) An already existing albuminuria is often increased by etherization. No such case in which chloroform was given was observed.

(2) Albuminuria can be caused by narcotization with chloroform and ether, more often with chloroform, the relative frequency with which it occurs after the use of chloroform and ether being 11.5 to 6.9.

(3) As a result of the use of chloroform, casts may appear in the urine. This is less frequent after the use of ether. The relation of frequency is 34.8 to 24.6.

(4) When casts are already present, both anæsthetics have the effect of increasing the number.—*Boston Med. and Surg. Jour.*

PROTECTION AGAINST POISONING BY LINIMENTS, ETC.—A most ingenious device for preventing mistakes in taking a wrong medicine has been contrived by Mr. R. Watson Councell. These accidents generally occur with medicinal preparations contained in bottles, as for instance, by the taking of a poisonous liniment instead of a mixture. To obviate this, Mr. Councell proposes to adapt the cork of a bottle containing liniment or other poisonous preparation, so that on proceeding to take the cork out a warning is given as to the contents of the bottle. For that purpose the cork is cut in two, horizontally, the two portions being then threaded along the vertical axis upon a piece of string, the lower end of which is knotted so that it cannot be drawn through the cork, while the upper end has a piece of paper attached bearing the word "poison." The two