

A BATTLE OVER A BED-BUG.—A sprightly quarrel is in progress among the homœopaths on the subject of bed-bugs. A number of years ago this interesting animal was introduced into their materia medica, in company with *pediculus capitis*, *crotalus horridus* and other lively medicines. In spite of some opposition from individuals, it gained a footing, and now holds a permanent place in *Allen's Homeopathic Materia Medica*, a standard authority. Dr. J. P. Dake, one of the strong men of the sect, wages war against it, his last demonstration taking the form of a lengthy article in the June number of the *Hannemannian Monthly*. In this, however, he almost surrenders, declaring that "as it had been admitted to the pages of the *Encyclopedia* by Dr. Allen, I will no longer protest against its remaining there, as it may be, after all, the 'right thing in the right place.'" Now that the question is stilled, it is to be hoped the demand for the valuable medicine will be so active as to prove beneficial to those localities where bed-bugs are not regarded as "the right thing in the right place."—*Pacific Med. and Surg. Jour.*

DEATH FROM CHLOROFORM.—We believe that this is the third death from chloroform which has occurred at Leicester within six months, that in all the cases the patients were men, between fifty and sixty years of age, and that in each there was a history of hard drinking. These cases should press very strongly on the profession of Leicester the question of chloroform *v.* ether. We believe that some of the best London surgeons have long settled the question in favor of ether on account of its unquestionably greater safety, and that for years they have not performed an operation under the influence of chloroform. The same lesson is taught very clearly by one of two deaths which occurred in London last week, while the patient was under the influence of chloroform. The history was that so common in such cases—violent struggling, stoppage of the pulse, death, and fatty degeneration of the heart discovered afterwards. The other case was the result of the administration of chloroform when the stomach was full of food, and illustrates too well the danger of such a practice, in this case unavoidable. A vomit was followed by a deep respiration, and the trachea and larynx filled with half-digested food, so that even tracheotomy did not restore the power of breathing.—*Lancet.*

A PULSE OF 21.—A remarkable instance of slow pulse is at the present time in M. Tillaux's service at the Lariboisière. The patient, a *chiffonnier*, seventy-seven years of age, came in to be treated for hydrocele, in all other respects seeming well, and jovial in his manner. It was almost by accident discovered that he had a pulse only of 21. It is regular, the two sounds of the heart and the short interval of silence that separates them occupying scarcely half a second. But the "grand silence" is extraordinarily prolonged, so as to continue nearly two seconds and a-half. During this absolutely nothing is heard in the heart—not the slightest souffle. But with the first sound a very distinct souffle is heard, which, continuing during the "petit silence," terminates suddenly with the valvular clap which constitutes the second sound. The heart seems large, its apex beating more externally and lower down than in the normal state. There is some emphysema of the lungs. The pulse was counted carefully four days in succession, and the intervals were found to be perfectly equal, and the same on both sides. The patient, who entered the hospital on August 5, has had some attacks of syncope since then, and at the present time he is suffering from considerable œdema of the legs.—*Gaz. des Hôp.*

CHOLERA INFANTUM—ITS TREATMENT.—Dr. E. W. Emerson (*Boston Med. and Surg. Jour.* July 27, 1876) gives the following views respecting the treatment of cholera infantum. The indications are :

1. To correct the dangerous and unfair distribution of the blood in the body, to which the purging, vomiting, cramps and coldness seem to be directly due, and later the greater danger of coma, convulsions or paralysis of the heart.
2. Failing in this, or not succeeding until too late, we should supply the water and perhaps the salts drained from the blood, as the thickening of the blood would prevent the good effects of a natural turn of the disease, and perhaps dispose to various organic lesions.
3. We should attend to the general hygiene, diet, etc., of patients.

To meet the first indications he recommends