

MEDICAL JOURNALS NOT APPRECIATED.—The following reply was returned to a circular letter soliciting subscriptions to a certain medical journal:

FARIBAULT, MINN.

Your Copy of the——Jurnal come, and the letter to—askin me to send fifty cens and git it fur a year. I don't nead no jurnals. When I git a tuff case I go off inter sum secrit plase and tell the lord all about it and wate for him to put inter my minde what ter do. That's bettern jurnals and syklopedes and such. If we hed more lord trustin docters and less colleges weed fare better. The lord noes morn all the docters and if we go to him fur noledge it ill be bettenr jurnals.

Fraternally in the lord,

A CHRISTIAN DOCTOR.

P. S.—I've practist medisen morn fifty yeers. Yore ken publish this letter if you want ter.—*Northwestern Lancet*.

AULDE (J.) ON THE TREATMENT OF TONSILLITIS.—Tonsillitis, in the early stages, is readily amenable to mild treatment. For example, I have a patient, a young lady, who suffers from spasmodic asthma, the attacks being frequently brought on by indiscretions in diet, followed or not by exposure to inclement weather. She is given to wearing thin-soled shoes and light-weight clothing, and has occasional attacks of sore throat, which have generally developed into tonsillitis. Now, however, these attacks can be promptly arrested by the exhibition of a solution containing mercury binioidide, gr. $\frac{1}{5}$, and atropine sulphate, gr. $\frac{1}{60}$, to four ounces of water, taken in teaspoonful doses at intervals of ten minutes during the first hour and at hourly intervals thereafter. Fever, increased pulse-rate, or chest-pains, would of course call for other medica-

tion, such as aconite, gelsemium, or bryonia; a rheumatic diathesis would indicate the employment of the salicylates, and a malarial cachexia, quinine; while in the later stage of the disease, under either condition assumed, calcium sulphide would prove most beneficial.—*Am. Therapist*.

BOWDITCH (V. Y.) ON THE EFFECT OF CHANGE OF POSTURE UPON HEART MURMURS.—From forty-two cases which I have examined with special reference to the point in question, I find the following results:

Twenty-one showed an increased intensity of murmur when the patient was lying down.

Of these, 9 were murmurs at the base; 8 at the apex; 2 both in base and apex; 2 could not be located absolutely.

Five showed increased intensity of murmur when the patient was sitting up.

Of these, 2 were murmurs at the apex; 3 could not be located, but were more or less diffused.

Sixteen showed no special difference in the murmurs upon change of position.

Of these, 6 were murmurs at the base; 9 at the apex; 1 could not be located.

Out of one hundred cases examined by Dr. Campbell the murmur became more distinct in the recumbent position in seventy-eight, more distinct in the upright position in six, unaffected by change of position in twelve, not heard standing but developed by lying down in four.

It would seem, therefore, that there is no definite law by which we can determine which position affects these changes most. The fact remains, however, that the murmurs are frequently affected in character by change of position, and this once noticed may lead to something more definite in the future.—*Internat. Med. Mag.*