

and body with lard, then quickly placing the child in a tub of water at about 103° F., there cleaning and washing the body with a soft linen cloth. He has never seen a child so treated suffer from catarrhal troubles in any way. —*Medical News*.

THE RADICAL CURE OF INGUINAL HERNIA IN CHILDREN.—

Broca (*Revue des Maladies des l'Enfance*) describes the operative treatment of inguinal hernia in children, with the report of seven cases.

This operation is of little importance in very young children.

1. The tissues are thin and delicate.
2. The parts are small and difficult to reach.
3. A thorough anatomical knowledge is necessary.

Through fear of operations many surgeons have adopted other measures—especially the application of a bandage. This sometimes does result in the cure of these cases, but its application must be continued from two to three years. If the hernia be complicated by ectopion of the testicle, then operation must be resorted to. Operation in very young children—from one to three years—would only be justifiable where a gradually increasing hernia should suddenly become irreducible or strangulated. Strangulation is a rare condition at these ages. Colotomy was formerly done in very young children for strangulation, with considerable success, but Broca believes the operation is rarely if ever necessary. Sometimes strangulated hernias can be reduced by pressure and carefully applied taxis.

Two reasons are given by some authors why operations in earlier years should not be performed.

1. Operations in children up to five years are generally grave.
2. Before five years the continued use of the bandage generally cures.

But if great care be taken during the operation and in the after treatment of the wound there is but little danger. A congenital hernia, without being a pro-peritoneal hernia, may have a dilatation retro-peritoneal or pro-peritoneal. These conditions were found in four adults operated upon. He thinks that pressure will cause obliteration of the inguinal canal; but how can that possibly affect this pro-peritoneal pocket?

Of the seven cases reported, the ages varied from

five months to twelve years. One case at five months was cured by means of a bandage. The remaining six cases were all operated upon, and only one was complicated by ectopion of the testicle. All the cases resulted in cures in from four to eight weeks.—*University Med. Magazine*.

THE MECHANICAL TREATMENT OF ERYSIPELAS.

—Dr. Hermann Kraell (*Therapeutische Monatsch.*), calls attention again to his method of treating erysipelas. He believes that the bacilli are much hindered in their progress when they encounter the firmer portions of the skin. With this in view he made use of an elastic band, encircling the head with it at the edge of the hair. In only one of his cases did the erysipelas extend upward beyond this barrier. The elastic must press quite firmly against the head. The disease may then spread over the whole face without extending into the hair at all. The spreading being thus prevented, the fever will last till the life process of the streptococci is over. The band must not be removed at once upon the cessation of fever, but be retained until the swelling and bluish-red color have disappeared from the artificial border.

Many patients find the band very unpleasant, but one who had, on a former occasion, had the disease spread all over the head, declared that the tension was not to be compared with that produced by the disease itself.

One woman carried for some time a red line across her forehead where the diseased area had pressed against the band.—*Therapeutic Gazette*.

COCAINE AS AN ANAPHRODISIAC.—

Dr. H. Wells (*La Semaine médicale*), has employed cocaine as a depresser of sexual excitability in man, whatever be its origin. It may be given either internally or by spraying it into the throat. Five centigrammes ($\frac{3}{4}$ of a grain) of the drug at a time are sufficient. It also may be employed as a lotion applied to the glans or prepuce, in a 4 per cent. solution, or injected into the urethra. The writer has observed that after spraying the throat or nasal cavity a considerable retraction of the penis takes place, with a manifest diminution of the sensibility of the glands and relaxation of the testicles. This observation suggested it as an anaphrodisiac.—*Lancet-Clinic*.