

even a uterine polypus. Lastly, when nature has been given fair play, the *écraseur* should come to the rescue and remove at once what might otherwise be the work of many months or years. He had recently under his care a case in which the tumor was completely embedded in the substance of the uterus, so much so that the os was not dilated in the very least and he had the satisfaction, after three or four operations, of completely removing the tumor, which was of the size of a small cocoa-nut. The patient is now perfectly well.

At the date of writing he had two other cases of the same kind but in both the tumor was much larger. He had commenced with the same plan of treatment in these, and he had every reason to believe that a cure would be effected.

The first step in the process is to prepare the passages for the removal of the tumor. For this purpose he recommends free division of the cervix uteri in one or more directions. The next step is breaking with the finger through the capsule, and little by little detaching the tumor from its bed. During the intervals efforts should be made, by the administration of ergot, borax, cinnamon, and other so-called oxytoxics, to secure contraction of the uterus so as to favour nature's method of expulsion. Galvanism is also another agent of great power in this respect, and a firm bandage is of service in cases where the tumor is large and projects well into the abdominal cavity. After the removal of these tumors, he advocates the subjoined after-treatment. The first thing to do is to secure firm contraction of the uterus after it is emptied of its contents. This is necessary not only to prevent hemorrhage, but also to avert the occurrence of septicæmia. The latter object will be still further secured by frequent injections of warm solutions of permanganate of potash, carried well up into the uterine cavity. In reference to medicines, he knows of none which are either useful or desirable, except it be opium, and this he regards as of a greater value than any or all other medicines put together. He is also very partial to the employment of hot linseed and laudanized poultices to the abdomen in all cases of operations upon the uterus where there is a liability to pelvic or peritoneal inflammation.

TONIC TOOTH-POWDER

Triturate well together one ounce of pulverized Peruvian bark, one ounce of pulverized castile soap, and two ounces of the best prepared chalk. It may be flavored by adding a little of the oils of wintergreen and rosemary, with the latter in a very small proportion. The powder is not only good for the teeth, but also a preventive of, and a remedy for, spongy gums. Another very good tooth-powder may be prepared by the addition of one ounce of pulverized orris-root to the above. The addition of bole armenian to tooth-powders is only for the purpose of coloring them, and is not of the slightest benefit. The Peruvian bark will impart sufficient coloring to this preparation.—*Physician & Pharmacist.*

THE RESUSCITATION OF ANIMATION IN NEWLY-BORN CHILDREN.

Dr. John Gregory, of Manchester, England, calls attention to two opposite conditions which he has found to exist in cases of suspended animation in the newly-born. In the first class the head appears to suffer from a redundancy of blood; and is most common when the head is born some time before the body, and the pressure upon the portion remaining in the uterus and the vagina causes an accumulation of blood to take place in the head. This variety is generally relieved by allowing a small quantity of blood to flow from the navel. The second variety is less commonly noticed, and is that in which the reverse takes place. In a breech presentation the head, being born last, is subjected to pressure which empties its vessels and produces anæmia of the nerve-centres of the brain and medulla. Such cases are quickly relieved by placing the child's head downwards, by which posture the return of the blood to the cranium is encouraged. It is his practice in the latter class of cases to allow the infant to hang head downward for about a minute at a time, and employ also friction of the back and nucha. In both varieties the postponement of respiratory movements is attributed by him to disturbance of the circulation in the medulla.—*The Doctor*

TREATMENT OF FIBROUS TUMORS OF THE UTERUS BY SUBCUTANEOUS INJECTIONS OF ERGOTINE.

—Subcutaneous injections of ergotine have been used already in various affections, particularly against aneurisms, by Langenbeck and Albanèse, and against hemorrhage (menorrhagia chiefly), by Ruben and Zente. Dr. Hildebrandt has gone further, and tried ergotine injections against fibrous tumors of the womb. He at first, however, had only made use of that means against the hemorrhage brought on by such a tumor. An unhoped for result crowned the treatment, as the tumor, which was very large, gradually diminished, and at last disappeared in about fifteen weeks. Except during menstruation, daily injections were made with 3 parts of ergotine dissolved in $7\frac{1}{2}$ of glycerine and $7\frac{1}{2}$ of water. The amount injected was the whole of a Pravaz syringe. In five or six other cases the treatment was nearly as successful. In two cases, however, symptoms of poisoning by ergotine occurred, and the treatment was abandoned. These results are very remarkable indeed, and fully deserve the attention of surgeons. (*Berliner Klinische Wochenschrift*, June 17, 1872.)

HYDRATE OF CHLORAL IN INCONTINENCE OF URINE.

Dr. Girolamo Leonardi has found chloral a most valuable remedy in nocturnal incontinence of urine. The dose for children is from five to ten grains taken in water before going to bed. For adults the dose is proportionately larger. The treatment has been successful in all of his recorded cases. The remedy must be repeated for several successive nights.—*Lo Sperimentale*, April, 1873.