Prof. Hammond cited at length the singular facts which have been observed since the discovery | of Flourens, viz., that birds which have lost their co-ordinating power, owing to a removal of a portion of the cerebellum, may again recover this. power without the reproduction of the missing ' nervous substance. How is this to be accounted for ! It is because the effect of an operation on the cerebellum is not wholly due to the simple loss of its substance, but partly to the shock or temporary violence inflicted on the cerebellum as a whole. Prof. Hammond thinks that injury to the cerebellum produces a state of vertigo, and that the subsequent irregularity of the voluntary motions is . due to this condition alone. After all, the greatest difficulties in the way of a positive doctrine of the cerebeliar function, are those presented by the results of pathological investigation. In the estimation of Professor Hammond these cases are damaging, and even fatal, to every received doctrine of the present day. It is always a good thing to have our opinions overhauled from time to time, and summoned anew to the bar of criticism by such a résumé as that given in his paper.

The Boston Medical and Surgical Journal of Feb. 11, 1868, contains an account of a case of cutaneous horn of the eyelid, reported by Dr. Shaw, Boston.

J. C. came to the Mass. Charitable Eye and Ear Infirmary vigorous looking man; history good. About six years previously had a small growth on the middle of the free border of the lower lid, which increased slowly in size. On its anterior surface there soon appeared a fine hair like outgrowth which was very hard, This continued to grow gradually, assuming the appearance of a horn, until about a year and a-half ago, having reached the size of an inch and a-half in length, and the same at the base, it dropped off, leaving a pimple as at first. Another horn commenced in the same place, and in a few months attained the size of the previous one, its weight having produced partial eversion of the lid, and consequent displacement of the lachrymal puncture and trouble from the overflow of tears. It was removed by making a circular incision around the base; care being taken to avoid the tarsal cartilage and hair bulbs, and also to preserve as much healthy skin as possible; the base was firmly imbedded, but easily separated with the scalpel, and the parts brought together by means of a stitch, leaving a small portion to granulate. This case is important only from its rarity, not having been noticed in the works of Stellwag, Wecker, Wells, Mackenzie, or other ophthalmologists.

The Wayne County, State of Michigan, Medical Society has forwarded a small pamphlet, entitled, "Life Assurance and its relations to the Medical Profession." The attention of the profession is called to the rate of compensation for examining applicants for Life Insurance, and the following resolutions were adopted:—

Resolved, That the fee for examination for life insurance companies shall be the sum of four dollars for each and every primary examination.

Resolved, That we will not give a certificate as "family physician" without the verbal or written assent of the person to be insured, and even then reserving the right to withhold the same if for the interest of the family of the applicant.

Resolved, That the fee for such certificate shall not be less than three dollars, if the blanks can be filled in the physician's office; and if further labor be entailed, a further fee of two dollars be added, the whole to be paid by the insurance company; and

Whereas, A united action of the profession is necessary to perfect the above recommendation, and carry the resolutions into proper effect; therefore,

Resolved, That the Wayne County Medical Society respectfully and earnestly ask of the profession, not members of the Society, in the city of Detroit, to cordially unite for the common good in our effort for remunerative fees for examination and certificates in life insurance, as we believe the charges demanded are equable and just.

Resolved, That the physicians of the State be requested to take like action in this matter; and that to further the same, your committee be empowered to present this report and resolutions to the State Medical Society at its next meeting in June.

H. SLATER, M.D., F.R.S., recommends the use of belladouna in asthma, illustrating its beneficial effects by the report of five cases in all of which it proved beneficial, he gives it in large doses and until its physiological effects are produced. He gives the tincture commencing in doses of ten minims and gradually increasing, we sum up in his own words as re-printed in the Lancet of January 30, 1869.

The advantages of administering it in the way I have described are:—

- 1. That, giving it at night, you bring the full force of the drug to bear upon the disease at the time at which it is most liable to come on, and thus, if you are successful, tide your patient over the critical time.
- 2. By gradually feeling your way up to the required dose, you are able ultimately to reach without fear a dose which you would be unwilling to prescribe without such a tentative appreach.
- 3. In those cases in which the therapeutical dose is reached before the physiological—that is, in which the asthma yields before the sight or head is appreciably affected—it enables you to stop short as soon