

Under the head of medicinal treatment, he strongly recommends trypsin as a solvent of false membrane. Of calomel, he says: The experience of many physicians justifies the belief that mercury, and especially calomel, employed within certain limits in the commencement of a pseudo-membranous inflammation does exert some controlling action on this disease. That it did much harm formerly when physicians prescribed it as freely as we now employ potassium chlorate, to the extent in many instances of increasing the cachexia and causing mercurialism should not deter us from its judicious use. In the ordinary form of diphtheria he would not advise the use of calomel, or would limit its employment to one or two doses of six to ten grains in the commencement of the disease in robust cases. But in croup, since the danger is not from the cachexia or blood-poisoning so much as from the laryngeal stenosis, which is apt to develop rapidly, that medicine is indicated, and should be prescribed, which most strongly retards the exudative process, and aids in liquifying and removing the pseudo-membrane, provided that it produce no deleterious effect which renders its use inadmissible. Hence it is proper to prescribe calomel in larger doses and for a longer time in the treatment of croup than in other forms of membranous inflammation, if it fulfil the indication as it seems to in a measure. In his own practice, however, calomel is not prescribed after the first or second day, since Dr. Smith prefers the use of other remedial measures, which are efficient, and are less likely to produce injurious effects. The subject of surgical treatment is also fully discussed, and Dr. Smith holds that we can claim for tracheotomy judiciously performed, and at a sufficiently early stage, the cure of one in every three patients on the average.

THE RECTUM.

We are glad to see a more or less general disposition to give that patient and long suffering organ, the uterus, a much-needed rest. Attention of late seems concentrating on its next-door neighbor, the rectum.

Many of our exchanges are devoting a large amount of space to a discussion of rectal diseases and normal and abnormal rectal conditions. Rectal reflexes have all of a sudden been found to be of almost universal prevalence. If a lawyer gets the heartburn, or a minister weakens in the preparation of his Sunday sermon, the probability is that there is something wrong with his rectum.

A late number of one of our exchanges contained four articles by as many different writers, besides an editorial, all calling attention to the rectum; and then it was plain to be seen that only the vestibule of the subject had been entered, as it were. A prominent surgeon of this city has not only *fringed* it, but pocketed it, and, in his enthusiasm, he seems to be conscienceless, and to want

to walk off with the universal rectum without a show of compunction.

Whether the rectum will stand as much steady and unremitting abuse as the uterus has done in the last fifty years, is a question.

It bids fair, however, to be a bigger bonanza to the doctors than ever the womb has been. It appertains to both sexes and all ages. From the great-grandfather to the neonatus, the rectum offers itself for inspection and treatment. And the beauty of it is, it suits all tastes in its tolerance of attention. The surgeon can cut it, tear it, cauterize it; blister and burn it; he can expand it, contract it, pinch it and pucker it; plug it and unplug it. The barber can barber it; the leecher can leech it; even the midwife can anoint it, syringe it and empty it.

The doctor can doctor it in any way he pleases. It takes big doses with composure and little doses with a quick response.

It is susceptible of medication both directly and indirectly, and it is a portion of the economy so universally necessary to the comfort, health and life of every single member of the human family that in its possibilities, there is, so to speak, no end to it.

However it may be treated, whether by expert or neophyte; it is senseless, earless, eyeless. However much the viscus may be damaged, in the course of its experiences, its hapless owner can't see it and be a reliable witness to malpractice in a court of justice. He can't by sight count its scars, measure in inches the depth of his sphinctral misery. Any error in diagnosis or failure in treatment, while necessarily fundamental and possibly serious in its consequences, is easily covered up for, with a little alum or tannin properly applied, so far as giving anything away is concerned, the rectum may be rendered as "tight as a drum."

The failure, should it occur, may be attributed to a "cold," or to some indiscretion in diet, or to atmospheric or telluric disturbances, to all of which the rectum is highly sensitive.

A sudden and unforeseen onset of microbes may upset the calculations and predictions of the most skilful and astute physician and render negative his best endeavors.

To the coming doctor the rectum presents an opening compared to which a malposed womb or dislocated ovary is nothing worth a thought.

In a word, the womb of the future is pregnancy with golden possibilities regarding the rectum.—*The Medical Era.*

PRESCRIPTION FOR ALOPECIA.

Oil of sweet almonds and stronger liquor of ammonia, of each, 1 ounce; spirit of rosemary, 4 ounces; honey water, 2 ounces. Mix. This lotion is to be rubbed well into the roots of the hair and over the scalp, and the head should afterwards be washed with clear, soft water—rain or distilled water if possible.