

then put upon a scruple dose of it three times a day. In a very few days thereafter, a change for the better was recognized. The medicine was continued in the same dose. The nasty discharge that oozed from beneath the toe-nails soon began to look more healthy; the nails one by one dropt off, and the swelling and inflammation of the toes and fingers subsided; the ulcers on the tongue healed, and the pains throughout the body gradually diminished, the patient the while getting stouter and better, till at the end of a month, on the large doses of the iodide, he felt quite well. The second case was that of a woman who, besides a coppery rash upon the skin, had ulceration of the soft palate. On her admission, the edges of the ulcer had a gray sloughing syphilitic character; all about the fauces was swollen and inflamed; the history, too, was syphilitic. The case was one in which destruction of the soft palate was imminent; she was put upon a scruple of the iodide three times a day, using besides only a gargle of Condyl's solution. Instead of the destruction I feared, the patient began to improve from the commencement of the treatment; the swollen state of the tongue, fauces, palate, soon subsided; the unpromising-looking ulcer presented a healthy granulating character, and rapidly healed up, and she was dismissed well in a fortnight. The other two cases under treatment by large doses of the iodide suffered from syphilitic nodes and ulcers on their limbs of a tertiary character, with severe aching pains in the joints. Under treatment they made rapid recoveries, the ulcers healing perfectly, while the pains entirely left them. Since noting the above cases, I have given the iodide in several others with most encouraging results. Altogether, I would be inclined to recommend its use to a much greater extent than has been the custom hitherto. It will probably displace in most cases of this disease the preparations of mercury, and while it does so with greater advantages, the bad consequences of the latter will be avoided.—*Edinburgh Med. Jour.*

Chronic Diarrhoea.

Dr. S. Montgomery, in the *Med. Archives* has the following judicious remarks on this disease:

It is very requisite that the patient should avoid all bodily fatigue. When able, a little exercise in the open air may be useful; but rest is indispensable until convalescence is fully established. Peace of mind is equally necessary.

The patient should, if possible, be in a high dry,

salubrious atmosphere, in an apartment large, well ventilated, and comfortable. The clothing should be warm with flannel next the skin, or even a flannel roller around the body. The diet and drink should be allowed in small quantities, eaten or imbibed slowly, and of the most mild and un-irritating description. The thirst, which is generally craving, should be gratified with small quantities of toast, rice, or barley water, mucilage of gum arabic, or carrageen. Spirituous or fermented liquors are contra-indicated, except in cases of great relaxation or prostration, and where no inflammation is present. The food should be such as will be easily digested, and that will leave but a small residue to pass off by alvine evacuation; boiled rice, with a little loaf sugar and good sweet milk, or eaten with a little beef or mutton carefully cooked, or with beef or with mutton soup, or a little good stale bread or crackers, may be occasionally substituted for the rice; but a very limited variety and small quantities of food only must be allowed, and a long and strict surveillance must be kept on the patient if we hope to obtain a permanent and perfect convalescence. Tapioca, arrow root, sago, and even a small quantity of fresh, ripe fruit, in proper season, will sometimes agree with our patient; but the golden rule is to drop everything which seems to disagree, and persist in the use of that which seems to suit the peculiarity of the disease, and the idiosyncrasy of the person.

A large list of medicines has been recommended in this disease, but opium is the *sine qua non*, the indispensable adjunct to all the others. Whether we give camphor or catechu, kino or krameria, simaruba or oak bark, log wood or galls, geranium or dewberry, nitrate of silver or sulphate of copper, oxide of zinc or sugar of lead, bismuth or chalk, opium in some form must enter into the prescription, or the remedy will probably fail; but we must be careful to allow only enough to allay irritation, and on this account the best way is to combine a very small quantity with the remedies given, and if more is necessary let it be administered alone as circumstances require. I believe it will be found that in this disease the solid opium, the common tincture, the acetum opii or Battley's sedative, will be superior to any of the alkaloids. Early in the disease, if the patient is not too young, too old, or too feeble, the application of a few leeches to the anus will do much good, but in a great majority of the cases they will not be necessary, the irritation and inflammatory action in the lower intestines being easily and happily subdued by a few small doses of opium, ipecacuanha and blue mass, or calomel, with cold water injections con-