

practice, and should not be resorted to when other means are at hand.

The pharmacist should cleanse his hands before making any attempt at dressing the wound, and this may be hastily done by washing them with soap and water and then dipping them in strong alcohol. These means are usually at hand and can be utilized quickly, and while they are by no means thorough, they are perhaps all that the pharmacist can make use of at the moment, unless he chances to have other antiseptic solutions available.

INSOLATION, OR SUNSTROKE.

I shall now refer to insolation, or "sun-stroke," as it is a subject that often interests the city pharmacists, and even occasionally the pharmacists of the country village as well. If a man is carried into your store prostrated by the heat, you can render valuable service both to the individual and to the physician by removing the clothing from the shoulders and chest of the unfortunate victim; in fact, strip him to the waist, place him in a perfectly recumbent position, and have some one pour cold water from a height onto his neck and back, while you hastily procure some ice from your soda fountain or elsewhere. Break the ice into small pieces, fill an ice-bag and apply it to the man's head. You may even add salt to it, thus making a freezing mixture; but it is of the utmost importance that such an application should not be allowed to remain in one position longer than a few moments, for in such an event the scalp would be frozen and devitalized, and serious injury result. If you have no rubber ice-bag, you can use an empty cork sack or a towel or such other material as may be at hand. The patient should be kept perfectly quiet until the physician arrives, and some stimulant may be administered, such as ether or ammonium carbonate.

SYNCOPE, OR FAINTING.

Another condition somewhat similar to the previous one is syncope from fright or injury or even possibly from joy, and the circumstances surrounding such emergencies are peculiarly calculated to the cause of the pharmacist "losing his head," so to speak, as they usually occur under conditions of great excitement.

When this accident occurs the victim in the majority of cases is a young lady, and she is, as a rule, promptly surrounded by a number of anxious friends or curious spectators or both, and the very first

impulse is to "lift her up;" but if the thoughtful pharmacist is present he will promptly and strenuously object to this proceeding, and will insist on keeping her in a perfectly recumbent position, and will at the same time loosen all clothing about the neck, chest and waist, and then sprinkle cold water over the face, neck and chest. The water should be sprinkled with considerable force, or poured from a height if the syncope is complete, but if only partial, then these proceedings may be unnecessary, and the administration of stimulating inhalations may suffice.

The most convenient inhalations are ammonia or amyl nitrate, but these are of little avail if the syncope is complete, as in that case the respiratory movements are almost absent. While these steps are being taken the anxious friends and over-curious onlookers should be urged to stand back and thus give the patient air, and in the majority of cases a few moments only will suffice to enable you to note evidences of recovery; the physician will arrive and the pharmacist's duty will have ended.

BURNS AND SCALDS.

In conclusion I shall refer briefly to the treatment of burns and scalds. True, there is but little for the pharmacist to do in this direction, but occasionally he is called upon for assistance in such accidents, and he should at least be aware of the fact that he can do but little, and thus avoid embarrassment. However, he may contribute quite considerably to the comfort of the victim by promptly adopting measures to exclude the air, and for this purpose a number of remedies have been suggested, but the time-honored carron oil possesses the great advantage of being nearly always at hand and is probably as efficacious as any of the newer remedies. Still we may add about one per cent. of thymol to the carron oil, and thus add to its antiseptic properties.

We should thoroughly saturate a piece of clean gauze or absorbent cotton with this preparation and cover the affected surface, and if the burn is not quite extensive, this will suffice to bring a great deal of relief to the sufferer. If, however, the burn covers a large surface, it may be necessary to give an anodyne in addition to the foregoing treatment, and perhaps the best one is morphine, either hypodermically or internally. This will give relief, and since the object of the

pharmacist's efforts is to give temporary relief, he will have accomplished it and can await the arrival of the physician.

I have now referred to a few of the emergencies that are most frequently encountered, and I wish to emphasize the fact that what I have said is intended for the pharmacist and not the physician, and while it covers, as I believe, fairly well the duty of the pharmacist in the cases cited, it would by no means cover the duty of a physician in the same cases. The pharmacist occupies a middleground between the physician and the layman, and while he is in no way competent to supplant the physician, and, indeed, has no inclination to do so, still, the public at large rightfully looks up to the pharmacist as a man of superior intellect and judgment, and expects him to be more competent to act in cases of emergency than is the ordinary man.

As I said in the beginning, time will not permit me to more than hint at the subject of emergencies in this paper, but I would suggest that a more extended study of the subject might be interesting to the pharmacist and would widen the sphere of his usefulness and influence.

BURNS AND SCALDS.

By Dr. A. Riza, New York.

On the fourth of July I had a serious case of burning in a boy of 12 years, caused by the premature explosion of some large firecrackers. The whole face and also the eyeballs were burned. I used the following prescription:

℞ Cocaine..... ʒ i-s
Boroglyceride..... ʒ ij

Sig.—Apply locally on absorbent cotton.

For the burns of the eyeballs:

℞ Atropine..... gr. iv
Cocaine..... gr. iv
Acid. oleic. gr. xl
Ol. Olive..... ʒ j

Dissolve alkaloids in the oleic acid by use of water bath and add to the olive oil, previously warmed.

As soon as the acute and painful stage was past I prescribed:

℞ Aristol.... ʒ ij
Ft. pulvis.

Sig.—Dust the parts.—*Medical Summary*.

It is estimated that over \$32,000,000 worth of patent medicines are sold each year in the United States.

The number of chemists and druggists in Great Britain, as shown by the register at the end of 1897, was 15,215.