

Antitoxin in Diphtheria.

REPORTS on the use of antitoxin are still, in most cases, favorable to its use. Where unfavorable results have occurred, they have been traceable to the serum. The great object in view now is to procure the antitoxin alone, separate from its vehicle, the serum. This is reported to have been done. A good many sorts are now being advertised, and it behooves the profession to procure none except that produced by reliable firms. It seems to be generally conceded that this line of treatment has come to stay. The drug has proved itself not only curative, but also most valuable as an immunizing agent. Those who have used it say that large doses should be given, the earlier in the disease the better. In a recent series of cases reported in this city, where a bacteriological examination had confirmed the diagnoses in some twenty cases, marked signs of recovery showed themselves inside twenty-four hours, the membrane rapidly disappeared, the temperature and pulse markedly lessened, and improvement generally was noted. An ordinary large hypodermic syringe may be used, strict asepsis of hands, instrument and site of injection being observed. B.

A CHAIR of Massage has been established in the University of Berlin, with Dr. Zabloudovsky as professor.

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RENIPUNCTURE FOR ALBUMINURIA. -Dr. Reginald Harrison, in the *Medical Record* of November 7th, claims good results for puncture of the kidney in some cases of albuminuria. He refers to some cases in his own practice, and quotes from that of others. He contends that the bad effects of inflammatory tension on the kidney is the same as in the case of the eye or testicle, where puncture has been of so much value. In some cases of nephritis, with suppression, there is a very high degree of vascular and tubular infarction. In these very acute cases relief can be afforded by surgical means. Again, if the albumin persists for some time despite treatment, it may be necessary to make an opening and puncture the organ. If the tension continues too long, structural deterioration is bound to ensue with cardiac disturbances. A moderate incision is made in the loin, so as to feel the organ both before and behind. Pressure on front by an assistant facilitates the operation on the kidney. Three or four punctures may be made in the capsule, and even an incision of the cortex. Pack the wound with gauze or use a drainage tube.