

with strong desire for defecation. Various aperients and enemata were unavailing; the rectum was cleared out and galvanism applied, but without result. Bad symptoms soon set in, succeeded by failing power of the heart. This was relieved by ether and laudanum. Liquid food was well taken and retained. On the sixth day, the patient, who had somewhat rallied, suddenly becoming worse, colotomy was performed. Flatus immediately escaped, and fæces some few hours afterwards. Localized peritonitis, inflammation of the skin, diarrhoea, gastric and intestinal irritation, etc., gave great anxiety for about four weeks. By this time the wound was well healed around the intestines, and the patient improved, and became restored to fair health; but remained weak. No passage per rectum has occurred since; but free discharges of thick mucus had proved troublesome. A swelling high up the pelvis, which, before operation, seemed like fæces accumulated in the intestinal coils, afterwards descended, and proved to be a tumor, and the cause of obstruction. The patient was doing well. Mr. Steele concludes with observing that where the cause of obstruction is obscure, and appears to be fæcal accumulation, all legitimate endeavors should be made to dislodge the same; that when the cause of obstruction is purely mechanical, opiate treatment should be immediately commenced, and operative interference promptly adopted; that in such a case as the one narrated, surgical aid is the only means of saving life; that a person with a tumor compressing the lower bowel is in a much better condition with an artificial anus than with a constantly forced passage by the natural orifice; that the growth of the tumor will not be nearly so rapid as if it were subject to compression by the fæces and strained defecation, and that operation is most likely to be successful when the obstruction is caused by tumor, there not being sloughing to fear, as in internal hernia or intussusception.—*Medical Times*.

TREATMENT OF CHILBLAINS.

F. RHIEH recommends an aqueous solution of iodine and tannin as a remedy for chilblains. He says that the result exceeded his expectations—five applications of the remedy being successful. The application has also been tried by others, with good results when properly applied. The solution is made as follows: About an ounce of tannin is dissolved in half a pint of water; seventy-four grains of iodine are dissolved in an ounce and three-fourths of spirit of wine; the two solutions are then mixed, and enough water is added to make up the whole to two and a half pints. The remedy is applied once daily, the best time being before going to bed. The mixture is gently warmed over a very slow fire; the affected part (e. g., the hand) is dipped in it while still cold, and held there until the liquid, on being stirred, feels uncomfortably hot. The vessel is then removed from the fire, and the hand is dried over it, without gloves. The vessel used must be of earthenware or porcelain, not of metal. Care should be taken not to use too great a quantity of iodine, especially when

abrasions are present. According to Rhien, four or five applications are sufficient.—*Brit. Med. Journ.*, Feb. 8, 1873.

W. T. CARTER, M.D. Louisville, Ky. (*Am. Practitioner*, Oct. 1872), recommends the following solution for the destruction of parasites: Corrosive sublimate, gr. xij.; alcohol $\frac{5}{8}$ iv.; Oil of Bergamot, Mj. Mix and add water $\frac{3}{4}$ iijss. This mixture should be thoroughly applied to every part of the body infested. The first application will, in the majority of cases, cause the death of every accessible louse; but it should be continued twice daily for at least one week, in order that none may escape. In that peculiar condition of the system, described so well by Dr. McCall Anderson, in which lice multiply on the body in such numbers and with such astonishing rapidity, the iodide of potassium alone, or in combination with prussic acid, given internally, has yielded the most satisfactory results.

MCINTOSH ON DYSMENORRHOEA AND ITS TREATMENT WITH SULPHATE OF QUINIA AND EXTRACT OF STRAMONIUM SEEDS.—The results of an experience with each of these drugs, used separately, led Dr. McIntosh (*American Quarterly Journal of Medical Science*, Jan., 1873) to unite them in the following proportions, varied according to the requirements of each individual case. 'Give a pill consisting of $\frac{1}{4}$ to $\frac{3}{4}$ gr. ext. daturæ stramon. sem.; $\frac{1}{2}$ to 3 grs. sulph. quiniæ; $\frac{1}{4}$ to $\frac{1}{2}$ gr. opii; 1 to 2 grs. camphor, three times a day for five days; beginning three days before the catamenial discharge, and continuing for two days after its inception. The same treatment is to be commenced just previously to the next monthly period, and usually from four to eight repetitions, where there is no mechanical obstruction, will secure a regular, painless monthly flow.' Later Dr. McIntosh has added powdered ipecacuanha to the above pill, and, as he states, 'with benefit.' With the foregoing treatment should always be combined such emmenagogue and ferruginous medicines as an anæmic or other condition may require, while special directions should be given to procure a daily action of the bowels. A careful avoidance must be observed of exposure to cold or wet, and great care in keeping the feet warm, and a good circulation in the lower extremities generally.'

ARSENIC IN DYSPEPSIA.

Dr. J. C. Thorowgood, in the *Practitioner*, speaks highly of the action of arsenic in many diseases of the stomach. He has found that one-drop doses of Fowler's solution in half an ounce of infusion of columbo had the effect, in a case he treated, of allaying the pain, stopping the vomiting of food, and enabling the patient to eat and digest small quantities of mutton. He states that the usual irritable tongue, with projecting papillæ and yellow or gray fur, indicate arsenic. The more purely local the gastric symptoms, the better is the chance of arsenic doing good. Where there is much general exhaustion of the system, with disordered urine or hepatic congestion, it does not promise much.—*The Georgia Medical Companion*.