## Selections.

## The Jonnesco Method of Anesthetization.

In the editorial article entitled "A Proposed Revival of Spinal Anesthetization," published in our issue for December 11th, we took a conservative attitude, because, whatever our impression was, we did not think it fair to our distinguished visitor to condemn his method of anesthetization without ample warrant in facts. The facts have not been slow in showing themselves, and they only confirm the feeling of distrust which we entertained when the article mentioned was prepared. We have now no hesitation in saying that it would be injudicious to substitute spinal anesthetization for the commoner methods of securing general anesthesia—that is to say, in the generality of cases.

In two out of three cases related by our London correspondent in the Journal for December 18th, the result may, we think, be fairly called unsatisfactory. In one of them, says our correspondent, "the skin incision was quite unfelt, as was the division of the epigastric aponeurosis, but as soon as an attempt was made to withdraw the omentum and stomach (the case was one of cancer of the stomach) the patient ground and said he felt 'as if his insides were being pulled out." In another case, one of chronic suppuration in the mastoid antrum, "upon incising the periosteum some pain was complained of, and, as this persisted at each attempt, a second injection was given. This, however, failed to have the desired effect, and the operation had to be completed under general anesthesia."

In this issue of the Journal we publish two articles relating to Professor Jonnesco's recent demonstrations in New York. One of them is by Dr. Virgil P. Gibney. of the Hospital for the Relief of the Ruptured and Crippled, and the other is by Dr. Aspinwall Judd. in which he reports the four cases of operation under stovaine and strychnine anesthesia performed in Dr. Robert T. Morris' service in the New York Post-Graduate Medical School and Hospital. It will be noticed that Dr. Gibney's cases showed more favorably than the others for the Jonnesco procedure, but we cannot overlook the fact that Dr. Gibney says: "Personally, however, I should hesitate a long while before I allowed any high injection of any solution into my spinal canal. The vascular supply within the canal is too rich, and the danger of hemorrhage induced thereby sufficiently