

benzoinol in three degrees of strength, 1 drop, 2 drops and three drops of the oil, respectively, to the ounce of benzoinol. On the first day, solution No. 1 is used (one drop to the ounce); on the second day, solution No. 2, and after this, solution No. 3. The benzoinol serves the useful purpose of causing the thorough diffusion of the oil, and also causes it to adhere with considerable tenacity to the mucous membrane. Dr. Horwitz prefers to use the oil by injection, employing a solution of the same strength in albolene or benzoinol. This plan I have tried, and believe it to be the best when the patient lacks intelligence, and is obliged to largely carry out his own treatment.

It is in beginning gonorrhœa that oil of cinnamon finds its most useful field. In acute, thoroughly developed cases, its employment induces considerable pain; but, though it does not check the disease, it causes abatement of the *ardor urinae*. In chronic cases it also seems of considerable use. I am far from claiming to have found a specific, but I am quite sure that cinnamon is a very valuable remedy in certain cases of gonorrhœa. In forty cases of beginning acute urethritis, clinically recognized as gonorrhœa, of from three to five days' duration, the following results were obtained:

In six cases the discharge ceased in two days and did not return. In twelve cases the discharge ceased in five days; in six cases the discharge ceased in from eight to ten days; in ten cases the discharge ceased in from ten to fifteen days, in two cases the treatment failed entirely, and was abandoned after two weeks; four cases did not return after the first visit.

No other treatment was used, although ordinary hygienic and dietetic precautions were taken. Dr. Horwitz informs me that fifteen beginning acute cases under his observation were cured within ten days. In ten cases of chronic gonorrhœa, without apparent stricture or granular patches, the treatment proved successful: four cases were cured in two weeks; three cases in three weeks; while three cases were benefited, but not cured. In no case was a complication observed.

These observations, chiefly made in the Jefferson College Hospital, would seem to justify the conclusion that oil of cinnamon is of value in the treatment of beginning gonorrhœa and of chronic gonorrhœa. Whether or not the drug will prove

of benefit when given internally, future experiments will show.

The injections should be made three or four times a day, immediately preceded by micturition and cleansing of the urethra with hydrogen dioxide. In cases in which considerable pain is caused by the injection, the weaker solutions should be used, and retained for but a short time.

The irritant injections, if strong solutions are used, seem to favour the development of stricture, an objection from which oil of cinnamon appears to be free.—J. CHALMERS DA COSTA, M.D., in *Medical News*.

GYNÆCOLOGY.

An Ovarian Tumour weighing 111 pounds. Removed from a Child of Fifteen, whose weight was Sixty-eight Pounds.—Miss B., of Benzetette, Pa., was first seen by me at Driftwood, Pa., February 26th, 1892, at the request of Dr. V. K. Corbett, of Caledonia. She was then fourteen years of age and had never menstruated. About eighteen months before I saw her, her abdomen began to enlarge. Six months afterward Dr. Corbett was consulted for an attack of considerable pain in the left side of the abdomen. He found that she was only voiding eight ounces of urine in twenty-four hours, but under proper treatment this soon reached a quart in amount, and has remained so ever since. He never discovered any albumen in the urine. In October, 1891, she had been tapped by a gynecologist, who is said to have diagnosed a solid and probably malignant tumour, connected most likely with the liver, omentum, and ovary, and who deemed its removal not feasible.

I found the abdomen enormously distended with fluid and advised very strongly that a small incision should be made in the abdominal wall, so that I could determine the relations of the growth with accuracy. Her father, however, was not present, and had made it a condition that nothing beyond tapping should be done. I tapped her immediately, and removed considerably over three gallons of amber coloured fluid. When this was evacuated I discovered a lobulated tumour on the right side of the abdomen, under the liver and apparently attached to it. It was evidently cystic in part, there being at least two cysts perceptible. Each of these I tapped, obtaining from the upper one a light