

that the ammonia salt is a stimulant. Ringer, Guttman, Bernard, and other eminent authorities have agreed that the potash salts are far more poisonous than those of soda, and that the potash salts are all equally deleterious in the same space of time "if administered in the same way." The heart has been considered as the organ which suffers most, and it has been held that it is always depressed and eventually paralyzed by the action of potash. While their views have been widely accepted, the ordinary medical man has prescribed bromide of potash perhaps twenty times where he has prescribed the corresponding soda salt once. Perhaps this has been due to habit, or fashion, even when the supposed poisonous action of potash was well known.

The experiments of most of the observers in the field, appear to have been made by injecting the potash salt directly into the blood, under which circumstances undoubted depression has been noted.

But it is now held that they act in quite a different manner when introduced into the stomach. Professor Germain Sée has lately, in a communication to the Academy of Medicine at Paris, made the statement that this toxic action of potash can not be shown to be true, when it is taken by the stomach. He also states that while the potash salts are depressants if thrown directly into the circulation, the soda salts are but slightly less so. Bunge has made some interesting calculations, by which he shows that a man who lives chiefly on potatoes consumes from 1000 to 1200 grains of potash, in twenty-four hours. If the potash were so prejudicial to muscular tissues we should expect to find here a very serious depression, but it is not so. While Bunge's illustration is striking, it is by no means conclusive, for we must take into account that in potatoes the potash is prepared, and compounded in the laboratory of nature, a vastly different matter from its preparation and compounding in the chemical laboratory. Whatever be the scientific value of the experiments heretofore made, Sée comes out bluntly with the statement that he prefers the action of iodide of potassium to that of the soda salt in the treatment of affections of the heart and lungs. Perhaps the truth is that we have entertained a too exaggerated idea of the poisonous effect of potassium salts, and that administered by

the stomach and in medicinal doses a deleterious effect upon warm-blooded animals can only be produced, if at all, by their very long continued use.

THERAPEUTIC NOTES.

Treatment of Endometritis.—For the treatment of the above affection, Professor Polk, in a recent clinic at Bellevue, strongly recommended the packing of the uterine cavity with iodoform gauze. It is a recognized fact that in inflammation of any cavity, or part of the organization, one of the first things to be obtained is good drainage, so that the effused inflammatory materials may be got rid of as soon as possible. Heretofore attempts have been made to drain the endometrium by means of hollow glass plugs, uterine stems, etc.; but the great objection to these means has been the expulsion of the plugs by uterine contractions consequent upon the irritation which their presence inevitably sets up. This difficulty is overcome by the use of iodoform gauze, which secures thorough drainage by capillary attraction, and the iodoform being itself an excellent antiseptic, is applied directly to the diseased uterine mucous membrane, and its beneficial effects in endometritis are already well known. The operation is performed as follows: the patient is placed either in Sim's position or the dorsal decubitus, the vagina is then thoroughly douched with 1-2000 bichloride, and it may be here stated that all vaginal operations are now performed in New York with nearly as much antiseptic precaution as are laparotomies. Sim's speculum is then introduced and held by an assistant, the posterior lip of the os is laid hold of with the vulsellum forceps and drawn down. Then the uterine cavity is thoroughly irrigated with 1-2000 bichloride, by means of a uterine irrigator, the return tube preventing the entrance of any of the fluid into the Fallopian tubes. Ellinger's dilators are now passed and the cervical canal well dilated, special care being observed that the internal os is included in the dilatation, and unless this point is attended to the treatment is apt to prove a failure.

The uterine cavity is again irrigated with 1-2000 bichloride; narrow strips of iodoform gauze are then wound around the point of a uterine sound and the endometrium thoroughly packed, a piece of gauze being allowed to hang into the vagina in