CREOSOTE IN PHTHISIS AND PULMONARY TUBERCULOSIS.

Prof. Sommerbrodt is an enthusiastic believer in the special virtues of creosote in phthisis and pulmonary tuberculosis. After an extensive use of the drug he gives us statistics of 5,000 cases he has treated in hospital. He claims for it the power of improving the appetite, limiting the secretions, and diminishing the irritable cough. Its primary virtue, however, is its anti-bacterian property, which checks the progress of the baneful disorder. He supports his belief by pointing to Guttman's bacterian experiments with the tubercular bacilli, which he cultivated in glycerine and destroyed with a 1 : 4,000 solution of creosote. From this experiment Guttman himself reasoned that, if he could get this quantity into circulation without injury to the organism, he might be able to arrest the progress of the bacilli; but when he considered that a man of 60 kilos (9 stone) contained 4,615 grammes of blood (9 lbs.) that would mean upwards of one gramme of creosote to be present in the circulation before any good effect could be expected.

From this data Professor Sommerbrodt postulates his treatment, and has capsules made, each containing 0.05 grm. (0.77 grain). Three of these capsules are given on the first day, four the second day, five the third day, and so on till twenty-one or twenty-nine, which he gave in three cases, are given, which would represent 1.35 gram. of the drug taken daily. This exactly completes Guttman's hypothesis of creosote, and Sommerbrodt believes that the facts of his results are perfectly consonant with Guttman's presumption. He points to a case sent him last year by a military surgeon. The patient was an officer in the army with marked tuberculosis, dulness over the fossa supra spinata dextra, rhonchi, emaciation, increasing cough, with spit, in which the bacilli and elastic tissues were to be found in great quantities. A year before this he had pleuritis sicca dextra.

On September 1 the creosote treatment commenced, and by September 18 he was using twenty capsules a day. On September 29 the morning sputa had very few bacilli with a few fibres of elastic tissue. On November 1 he returned to duty, general health improved, dulness disappeared, and morning cough left him in a short time. During the whole winter he attended to his duty in the midst of snow and rain, during which period he gained twenty pounds in weight. By the month of April this year every sign of tuberculosis had disappeared, and perfect health seems now to be established.

From September 1 to June 1 he had used 5,400 capsules, representing 270 grammes of creosote (nearly 7 ounces), and 1,080 grms. of balsam of Tolu (33 ounces) with which it was combined. He assures us that he has treated many other cases in the same way. Although actual experiments with animals do not confirm this opinion, Sommerbrodt is convinced that creosote does more than improve the digestion, according to Klemperer, or reduce the secretions, as Cornet believes. Sommerbrodt proposes that Koch should examine the blood serum of a patient after a month's use of gramme doses, and he thinks he will find that all bacilli have disappeared. He advises the creosote to be administered immediately after food, which may be taken either in the form of capsule, tincture, or wine. —*Med. Press and Circular.*

THE NEW HYPNOTIC, SULPHONAL.

In the discussion on Recently Introduced Hypnotics and analgæsics, reported in the *Journal* of November 2nd, great stress is laid on the fact that sulphonal, although in other respects one of the most useful of sleep producers, has the disadvantage of being only slightly soluble, and therefore slow in its actions and not easily administered. I have found that the ordinary dose (from 20 to 40 grains) can be readily dissolved in a cupful of hot tea or coffee, preferably the latter, and that no precipitation occurs till the temperature is below the body heat. Probably, therefore, if given in this menstrum the sulphonal will be absorbed in the liquid state, and thus act more quickly; more especially as it has been shown by Professor Kast that the presence of peptones hinders precipitation. Even if precipitation does occur the powder is then in a much finer state of division than can be obtained by mechanical means, and the rapidity of absorption should be proportionately greater. This method will also be found useful in nervous cases where, as often happens, the patient refuses or objects to take medicine. In these cases sulphonal is often of the greatest service, and its tastelessness gives a great advantage over paraldehyde and most of the other soporifics. In a severe case of melancholia I used it more or less constantly for a period of five months, at one time giving it every night for four weeks in doses of 30 or 40 grains without any ill effects. Most of the other remedies had been previously tried, large doses of chloral, bromide of potash, cannabis indica, urethane, paraldehyde (in 2-drachm doses), &c., having no appreciable effect, while a third of a grain of morphine, given subcutaneously on one or two occasions, only increased the excitement. In this case it was found that the sulphonal, given as a powder, acted more quickly when finely ground than when given in a coarser state, usually taking from an hour to an hour and a half to produce its effect. The torpor and lassitude referred to as usually following the night's sleep I found could be got rid of by careful gradation of the dose. So far from any bad effects occurring, the patient's appetite invariably improved when the drug was started