

it must have been anterior to the date (1830) given by Dr. W. I believe it was in 1825. Under the authority of the great name of Dr. Stephenson, I for many years invariably had recourse to large doses of acetate of lead in alarming cases of post partum hæmorrhage and I can safely say I have *never* had occasion to regret it. It has never failed me, nor have any ill effects ever followed its use.

Upon one occasion (in 1820) an attempt was made to fasten on me the charge of "reckless rashness in the exhibition of monstrous doses of heroic remedies." My patient however testified "I knew I was dying and Dr. A. gave me something sweetish which puckered up my mouth and it immediately brought me back to life." There is no fact in all my past experience of which I am more certain than that her life was saved by my "heroic" dose and that nothing else would have saved her. I have seen the effects of the douche of ice water, of the plugging of the vagina with ice, of introducing the hand, and of abdominal frictions, but in my experience none of these means compare with the acetate. Where I have had reasons from past experience to dread flooding, I have been in the habit of giving a full anticipatory dose of *secale cornutum*, but I question whether the acetate would not be the safer and better practice.

As to the use of the perchloride of iron injected into the uterus—though I know it has high authority in its favor, I have never witnessed its effects and I should not have the courage to try it—I should be the less tempted to do so, as I know the action of the acetate of lead to be more safe and immediate. I have used it in scores of cases, and I know of no remedy in any disease that is so prompt in its action; its celerity seems actually to be electrical.

Yours respectfully,

ALFRED A. ANDREWS.

Montreal Jan. 10th, 1878.

SULPHATE OF CINCHONIDIA.

To the Editor of the CANADA LANCET.

Sir;—I notice in last number an article on "Sulphate of Cinchonidia." I may state that I have used it exclusively for the past 18 months with perfect satisfaction as a substitute for quinine, and with perhaps better effects as a tonic. I have used on an average five ounces per week, and even at the same price would use it in many cases in preference to quinine.

Yours, &c.,

H. McColl.

Lapeer, Mich. Jan. 12th, 1878.

Selected Articles.

CASES OF CARDIAC DISEASE.

CLINIC BY PROF. WM. PEPPER.

CASE 1.—J. McK., male, fifteen years of age. Has been complaining of palpitation, dyspnoea, and flushings of the face for the past four or five years. About two years ago had a severe attack of rheumatism. No dropsy and no swelling of the feet or any other part of the body. His heart to-day is very rapid; pulse running 124 to the minute. The heart's action is violent, and the apex-beat is too far down and too far to the left. The impulse is heaving. Both sounds of the heart are diseased. The murmurs are very weak at the point of the heart. There are no murmurs heard upward and to the left, but upward and to the right they are heard very strongly. The murmurs are transmitted into the aorta and carotids. This is a case of double aortic disease, stenosis and regurgitation.

CASE 2.—P. S., male, 40 years of age. Has been suffering for four years from sharp pain over the heart, dyspnoea and palpitation. I find, upon auscultation, two murmurs, one synchronous with the carotid and the other with the radial pulse. The natural sounds of the heart are entirely obscured in this case. The murmurs are but feebly heard at the point of the heart. The first murmur is transmitted round to the left; the other, which is of a duplex character, is heard loudly in the carotids and in the bronchials as low down as the elbow. This is a case of double aortic and of mitral disease, aortic stenosis and regurgitation.

CASE 3.—L. P., female, 15 years of age. Had pain in shoulder for first time two months ago. This pain is worse in damp weather. No cough; appetite good; father has had rheumatism; no swelling of the feet, but good deal of epistaxis. For past two years has suffered from shortness of breath and palpitation, headache, dizziness and slight symptoms of dyspepsia.

CASE 4.—M. O'B., 11 years of age. For two years past has been complaining of pains in joints. More recently there has been palpitation of the heart and shortness of breath. Has been having obscure attacks of rheumatism for past two years. We must remember that rheumatic attacks are very often overlooked in young children. The case is treated as one of simple, continued fever, teething, or indigestion, and nothing thought of the rheumatic trouble until four or five years afterwards, perhaps, we find that the patient has some form of heart disease. Both of these cases (3 and 4) are instances of mitral regurgitation. The murmur in both cases is systolic, synchronous with first sound of heart, and transmitted round to the left.