had been perfectly successful. The deprivation of fluid caused but little distress.

Dr. Edis, remarked that the chief thing to be remembered was to limit the supplies, to act on the bowels, and to insure perfect rest to the mammæ. He was accustomed to order a belladonna plaster to be applied to the mammary region within twenty-four hours of delivery, thus exercising pressure as well as arresting the secretion of milk. Abstinence from fluids and great moderation in diet were enjoined for the first few days, an aperient mixture of sulphate of magnesia and iodide of potassium being given twice or thrice daily, to relieve the bowels. The shoulders should be raised, and the arms kept perfectly quiet; the upper part of the chest being only lightly covered; any friction or drawing of the breasts being strictly prohibited. Where this method had been adopted he had never seen a single instance of mammary abscess. An evaporating lotion continuously applied to the mammæ was in some instances sufficient to prevent the secretion of milk; but the pressure obtained from the plaster was of great service, and effectually prevented the employment of any friction.

THE THERAPEUTIC VALUE OF IODIDE OF POTASSIUM.

As I have for several years paid considerable attention to the action of iodide of potassium, I venture to offer the following remarks as supplementary to Mr. Spurgin's article in the *Journal* of September 5th, 1874. This medicine has been accredited with many modes of action: thus, in struma as an alterative, in asthma as a sedative, and in diptheria as an antidote. To all these titles it may have a claim which different observers may think fairly borne out; but certainly the one distinct and indisputable action of iodide of potassium which I have noticed, is that of *stimulating the mucous membranes;* thereby influencing their action and promoting their secretions. Thus, as the results of its use, there are pain and sense of fulness across the eyes; increased secretion from the nares, mouth, fauces and bronchi; leucorrhœa and menorrhagia are greatly aggravated; and in persons very susceptible of its influence, diarrhœa is induced, not so much of a cathartic as of a dysenteric kind; that is, rather an increase of mucus with tenesmus than of serum with catharsis.

In a person suffering from an attack of chronic winter cough, the first symptoms are great difficulty in breathing, amounting to a sense of suffocation; hard, dry, racking cough, which the patient says he cannot subdue; while he expresses a belief that relief would be obtained if something could be brought up. The suffocation complained of has been attributed to a swollen state of the air-passages, obstructing the respiration; but there is a fair probability that the dry congested condition of the membranes is unfavorable to the interchange of gases requisite for blood-aëration, and the situation of the patient such that, however he may fill his lungs, his sufferings remain unrelieved. Whatever the actual state of matters at this point, certain it is, that as soon as expectoration sets in, the breathing is improved; and although the disease has by no means gone, the patient is so far better. Many hours of severe suffering may be obviated by taking advantage of the power of iodide of potassium to restore and promote the secretion of the bronchial membranes, thereby greatly relieving the congested blood-vessels, producing comparative tranquillity of breathing, and getting the patient over the first stage of the disease much sooner than he otherwise would. This, however, is possibly not its only value. For, here again, however opinions may differ as to the cause of the emphysema which from an early period exists in these cases, no one can have witnessed the severe and straining cough at the onset of the attack, without feeling that it is at least possible for either dilatation of the air-cells or rupture of the tissue of the lung to take place—complications much less likely to occur, so far as the cough is concerned, when the sputum has been rendered easier of expectoration and the irritability of the congested membranes removed by free secretion. It is further to be remarked that the action of the iodide of potassium changes the purulent character of the sputa in chronic bronchitis to a much healthier appearance. From this view of its operation, it follows, as a matter of course, that when free secretion of mucus has set in the medicine should be used with caution or altogether abandoned; and, therefore, when in the treatment of bronchitis—capillary or chronic—moist *râles* are fairly established, the further management of the case should be on the principle of preventing a too abundant secretion, at the same time employing such means as may assist expectoration and maintain the strength.

In asthma, iodide of potassium is recognised as a valuable medicine. Here the explanation of its action generally given, is that of a sedative relieving bronchial spasm; evidence of the presence of spasm being found in the wheezing and whistling sounds heard in auscultation. Either of these sounds, however, fairly suggests the question, how far a fit of asthma is dependent on, or, at all events, greatly aggravated by, an abnormally dry condition of the mucous membranes, acting as in the diseases already mentioned, which is relieved by the iodide restoring the secretion.

In diphtheria, iodide of potassium is looked upon by many practitioners as the best remedy we possess. Here its alterative and sedative actions are laid aside, and we have it doing duty as an antidote to diphtheritic poison; although, so far as can be seen, it exercises no new influence. In this disease, while there is free secretion from the nares, the breathing and cough-sounds are usually not very alarming, nor is respiration greatly impeded. It is not till the nares become dry—and doubtless the pharyngeal, laryngeal, and tracheal secretions diminished—that the formation of false membrane proceeds with fatal rapidity; hence, it does not seem too much to assume, so long as an iodide can keep up these secretions in such profusion as to prevent them from remaining on the parts sufficiently long