

Should there be any recurrence in the groin, Mr. Allingham would ligature the femoral artery and vein, and then thoroughly clear away the whole of Scarpa's triangle, and if necessary turn up the peritoneum and clear away the external iliac glands.

RELATIONS BETWEEN CHOREA AND EPILEPSY.—Dr. Trowbridge, *Alienist and Neurologist; Med. Times*, says there is an intimate relation between epilepsy and chorea, both diseases being due to disturbances of the motor and intellectual centres of the brain, which differ only in the degree of intensity. Chorea predisposes towards epilepsy, and epilepsy toward chorea—the former being the most frequent condition. Chorea in one generation may be transmitted as epilepsy in the next or succeeding generations; or the epilepsy may appear first, and the chorea in the following generations. A neurotic taint in the parent or parents may make one child choreic and another epileptic. The diseases may exist simultaneously, but in these cases they are in inverse ratio, *i. e.*, the more violent the chorea, the less frequent and severe the epileptic convulsions, and *vice versa*, the more violent the epilepsy, the less marked are the choreic movements. In cases of chorea and epilepsy there is more or less mental impairment.

RECLUS, *Gaz. de Hôpitaux; Am. Jour. Med. Science*, speaks of the use of hot water for the relief of painful hæmorrhoidal tumors. Tampons, wet with a 2 per cent. cocaine solution, should be kept in contact with the anus. In order to give a more certain relief, the anus should be dilated with a bivalve speculum, with or without anæsthesia. A tampon wet with a 2 per cent. cocaine solution is inserted in the ampullæ recti for two or three minutes. An injection of a 1 per cent. solution of cocaine is made directly into the substance of the sphincter muscle. The speculum is then introduced and maximum dilatation made.

Reclus has treated sixty cases after this method, with only one failure. The relief was absolute, and the condition did not return. The author has never seen any disagreeable or dangerous symptoms result from this treatment. If it is thought likely that there will be a return of the trouble, the pile tumors should be cut off with cocaine anæsthesia.

GLYCERINE IN GRAVEL.—Dr. Heymann, *Revista de Ciencias Medicas de Barcelona; Med. and Surg. Rep.*, has employed glycerine in renal lithiasis, on account of its property of dissolving uric acid and also passing unaltered through the kidneys. He records fourteen cases treated by this method. He summarizes his impressions as follows:

The first effect of its ingestion is to increase the thirst. In those suffering from stone in the kidneys, pains appeared in this region, it being limited to the one side affected. The quantity of urine was increased, and, after a varying time of nine to twenty-four hours, small calculi were expelled. In ten out of these fourteen cases he obtained favorable results. The pains were not as severe as those of renal colic while the urine, after its injection contained neither albumen, sugar nor hemoglobin. Even after three to four hours the presence of glycerine could be discovered in the urine, in appreciable quantities. A large quantity of mucus was also noticed. Based upon these results he regards glycerine as the most efficient means of treating renal lithiasis.

CHRONIC GLYCOSURIA.—Sir Dyce Duckworth, *Br. Med. Jour.*, speaks of that class of cases which presents saccharine urine without any of the typical symptoms of diabetes. He believes in a modified diet, not a complete exclusion of starches and sugars. The moderate use of alcoholic drinks is permitted, Bordeaux and Moselle being preferable, though diluted whisky may be used. He does not consider it advisable to use opium in any form. He believes alkalies given in effervescence to be much preferable. Strychnine and arsenic he considers of the greatest value. While arsenic is not a curative agent, it is of inestimable value in all cases. The more regular and equable the life led the less are the inroads made by diabetes.

RELATION OF ANEURYSM TO SYPHILIS.—For many years, Dr. D. Drummond, *Br. Med. Jour.*, has been deeply interested in the connection between syphilis and aneurysm. Since commencing the investigation, no indisputable case has come under his notice in which specific disease was wanting, excepting two or three examples of acute softening of the arterial wall, with aneurys-