

to allay pain is the hypodermic injection of morphia. The stomachial administration of the same agent is inefficient, owing to the diminished absorption power of the organ. Laudanum by enema, morphia in the form of suppository, or the endermic use of morphia, are preferable to the stomach administration. Great care is necessary in the prescription of anodynes, for the need grows rapidly, and the consumption becomes enormous, reducing the patient to a mental and moral weakness dreadful to contemplate.

Arsenic, in the form of Fowler's solution, one or two drops, three times a day, has considerable power to allay pain, and is not without influence in retarding the growth of epithelial cancer. As respects the power to relieve pain, the physiological basis for its employment is the action of arsenic, in toxic doses, on the nervous system of animal life. It has been repeatedly observed that sometimes, in large doses, no vomiting was produced, but coma and insensibility followed. A great many facts have now been accumulated, proving that cancer of epithelial origin may be greatly retarded in its growth by the persistent use of moderate doses—two drops of Fowler's solution *ter in die*.

The author's considerable experience in the treatment of carcinoma of the stomach warrants the statement that the best results are obtained by the persistent use of carbolic acid and iodine, in the form advised above, and of arsenic, in the form of Fowler's solution. It may not be needless to observe that these agents should not be given in one prescription—the carbolic acid and iodine together, the Fowler's solution at another time.—*N. Y. Medical Journal*.

INTRA-UTERINE MEDICATION. — Dr. Wallace (*Med. Press and Circular*), says:—I have found the following simple arrangement for intra-uterine medication answer very well: Cut the end off a flexible No. 10 catheter, pass the wire stilette through it, and make a knob on the end of it with wax and cotton wool, which will just cover the end of the catheter; then push up the stilette about an inch and a-half, roll cotton wool round it, and dip it in the solution to be applied (carbolic acid and iodine is excellent), and draw it within the catheter so that the knob just covers the end, give it a bend like a uterine sound, and pass it up to the fundus of the uterus; then draw the catheter down the wire. This, of course, brings the medicated cotton wool in contact with the uterus through its whole length. After leaving it in for a minute or two, it can be withdrawn. The speculum is not needed. The main recommendation of this arrangement is that it saves the cost of a 20s. or 25s. instrument, an important matter in these times.

DISLOCATION OF THE FEMUR ON THE DORSUM ILII IN A CHILD FOUR YEARS OLD.—The following

interesting case is reported by Dr. Thompson, of Onondaga, Ont., in the *Hospital Gazette*.—On the 10th of June, 1879, Kate Isaac, an Indian child, aged four years, living with her parents on the Tuscarora Reserve, Ontario, Canada, fell from a wagon and injured her hip. Dr. Dee, the medical officer, to the Six Nation Indians, and an old pupil of yours, was called to visit the child on the evening of the 11th. He at once diagnosed it as a case of dislocation of the left femur on the dorsum ilii. Preferring to have assistance before attempting reduction, he called on me very early on the morning of the 12th, when I accompanied Dr. Dee to the home of the little patient. It was a well marked case of dislocation on the dorsum ilii. Dr. Dee having administered chloroform, I reduced the dislocation in less than three minutes by Bigelow's method. The bone resuming its place with an audible click which was heard by all in the room. The child was soon able to walk about, and is now as well as if the accident had never happened.

MEDICAL STUDENTS' HYSTERIA. — During the fortnight following the death of the late Napoleon, Sir James Paget was consulted for stone in the bladder, by no less than four gentlemen who had nothing the matter with them. This leads me to speak of a form of hysteria which is frequent in males, and perhaps more so in our own profession than in any other class of people. How many students are there of one year's standing or more in this hospital or any other who have not imagined that they were the victims of some fatal disease? I myself, when a student, was convinced that I had both heart disease and phthisis. . . . Scores of students consult yearly their medical preceptors for complaints of which they have not the first symptom.—*Mr. P. Horrocks*.

DIPSOMANIA.—Charles Napier, an English scientist, says that dipsomania is relatively under control when a farinaceous diet is employed. Among the articles which are specified as antagonistic to alcohol, are macaroni, haricot beans, dried peas and lentils, well boiled and seasoned with butter or olive oil. He claims that the carbon thus ingested renders unnecessary, and therefore repels, the carbon in the alcoholic beverages. He also states that confirmed drunkards, and those brought to death's door by their habits, have been fully cured by a proper farinaceous regimen.

TREATMENT OF PROLAPSUS ANI. — Dr. Vidal recommends injection of a solution of ergotin for this purpose. The *Paris Médical* mentions three cases in which this method was employed. In one of these the prolapse, which had existed for eight years, yielded to the treatment in three months. In two other instances the cure was much more