

write thus, because a few weeks since I lent my set of tubes to a practitioner in a neighboring town to use, if necessary, in a case of diphtheria. The larynx became invaded and the child died, the physician not wishing to attempt an operation of which he had no practical experience.

If intubation did not have as good a statistical record as tracheotomy, it would still be a very useful operation, since it is admissible in so many cases where parents would not consent to a cutting operation. No anæsthetic is needed, there is no shock, loss of blood, or open wound liable to erysipelas, etc. The air, first moistened and warmed by the natural passages, causes no drying of mucus, which renders the after-treatment of tracheotomy so tedious and anxious. Of course tracheotomy still holds as valuable a place in surgery as ever, but in many cases intubation will successfully take its place. To those who intend procuring a set of intubation instruments I can recommend Waxam's book on Intubation of Larynx, published by Chas. Truax & Co., Chicago, Ill., for instruction in mode of operating and after-treatment.

GRAND FORKS, DAKOTA.

Selections.

APPLICATION FOR BURNS.—As an application for burns, the *Centralbl. für Therap.* suggests the following :

R.—Olivæ	6 parts.
Salol	1 part.
Aquæ calcis	6 parts.—M.

—*Medical News.*

ANTIPYRINE IN HÆMORRHOIDAL ULCERS.—J. Schreiber ("Therap. Monatsh"; *Memorabil*) reports a case of obstinate hæmorrhoidal ulceration in which the itching was promptly stopped and healing soon produced by insufflations of finely powdered antipyrine.—*N. Y. Medical Journal.*

THE HOUR OF DEATH.—It has been said that the greatest number of deaths occur between four and six o'clock in the morning. As a matter of curiosity, and to ascertain whether there is any truth in this statement, Dr. Charles Féré has tabulated the hour of death of all the patients dying in two of the hospitals in Paris for the past ten years. He found that there was no

preponderance of mortality at any particular hour, although there were somewhat fewer deaths between seven and eleven o'clock in the evening than at other periods of the day.—*N. Y. Medical Record.*

CASCARA SAGRADA IN MIXTURES.—Dr. John Irving (*British Medical Journal*) remarks that the addition of water to the liquid extract of cascara of the British Pharmacopœia makes a muddy and rather repulsive-looking draught, but that the addition of a very small quantity of ammonia-water renders it clear and of a bright ruby-red by transmitted light. Other drugs may be mixed with it, provided the mixture is made alkaline by means of ammonia. Associated with iron, cascara prevents the constipating effect of that drug. Dr. Irving recommends the following formula :

Citrate of iron and ammonium . . .	30 grains ;
Ammonia-water	10 minims ;
Liquid ext. of cascara sagrada . .	$\frac{1}{2}$ -1 drachm.
Solution of saccharin (5 per ct.) enough	to sweeten
An aromatic water	to 6 ounces.

An ounce to be taken three times a day.—*N. Y. Medical Journal.*

ANTIPYRINE AS A UTERINE SEDATIVE.—Windschmid (*Allg. med. Ctrl.-Ztg*; *Union méd.*) prescribes enemata of thirty grains of antipyrine before or during menstruation in cases of dysmenorrhœa. In two obstinate cases he has known this treatment to prove particularly satisfactory, three doses being given (at intervals of twelve hours between the first and second, and of twenty-four hours between the second and third). He notes profuse sweating and slight ischuria as among the inconveniences of the method, and adds that it has sometimes been necessary to give a glass of wine or milk to avert imminent collapse. Rivière ("Gaz. hebdom. des. sci. méd. de Bordeaux"; "*Union méd.*") has found the same drug very efficient in allaying after-pains, in doses of fifteen grains by the mouth. A single dose proved enough in twelve out of twenty-eight cases, and two doses, at an hour's interval, in twenty out of thirty-eight cases. When it fails, he says, retention of placental debris or the like is to be suspected. He states that the drug is not eliminated by the milk.—*N. Y. Medical Journal.*