

equal ergot, in its power of exciting uterine contractions during labor.

Dr. Bouchelle, of Mississippi, who believes it to be an excellent emmenagogue, and not inferior to ergot in promoting contraction, states that it is habitually and effectually resorted to by the negroes of the South for producing abortion; and thinks that it acts in this way without injury to the general health. To assist labor, he employed a decoction made by boiling four ounces of the inner bark of the root in a quart of water to a pint, and gives a wineglassful every twenty or thirty minutes.

Dr. Ready, of Edgefield District, South Carolina, says that his attention was called to its emmenagogue properties by an article which appeared in a medical journal published some years since. He has since used it in suppression of the menses, but more particularly in many cases of flooding with entire success. Dr. Ready believed it to produce as active contractions of the uterus as ergot itself.

Dr. Porcher states that, in South Carolina, much use is made of the root in the treatment of asthma—a decoction being generally employed.

This plant has been used in the South and West as a substitute for quinine in intermittent fever.

Professor R. H. Frost, of Charleston, South Carolina, communicated to the *Charleston Medical Journal and Review* the following facts with reference to the use of the cotton seed (*Gossypium Herbaceum*) as an anti-periodic in intermittent fever:

"The information is derived from Dr. W. B. Davis, of Monticello, Fairfield District, South Carolina, in reply to enquiries made by him as to the medicinal properties and uses of cotton seed tea in some of the forms of fever. The use of cotton seed tea in fever originated with a planter in Newbury District, who has used it liberally among his negroes, and uniformly with success. 'I have never failed,' said he, 'to cure a patient with a single dose of it, even where large doses of quinine have failed. When a patient has been ill of third-day fever and ague, and for months, in such cases success has followed its use.'

"Professor Shepard's analysis of cotton seed shows it to be composed of many inorganic matters, some of which may really possess great medicinal virtue in this disease.

"The mode of using cotton seed tea is as follows: After having given a dose of calomel, the day or night previous to the attack, followed by castor oil in time to produce a cathartic effect before administering the tea, you put a pint of cotton seed with a quart of water, in a vessel, boil an hour or two. Before the usual recurrence of the ague, give the patient a gill of the warm tea to drink.

"Without advancing any opinion with reference to its exhibition, whether for or against, I present it to the notice of the profession as a remedial agent becoming popular in domestic use in the section of the country mentioned, and, therefore, claiming investigation on the part of the profession."

H. D. Brown, of Copiah County, Mississippi, communicated to one of the newspapers during the recent war, the following notice on the use of cotton seed tea as a substitute for quinine:

"I beg to make public the following certain and thoroughly tried cure for ague and fever: one pint of cotton seed, two pints of water, boiled down to one of tea, taken warm one hour before the expected attack. I have tried this effectually, and unhesitatingly say it is better than quinine; and, could I obtain the latter article gratuitously, I would infinitely prefer the cotton seed tea. It will not only cure invariably, but permanently, and is not at all unpleasant to the taste."—*St. Louis Med. Reporter*.

## ECTROPIUM INTESTINORUM.

By GEO. FREDIGKE, M.D., CHICAGO.

*History.*—The individual affected was a boy, born at 6.30 A.M., the 15th November, by Mrs. B., wife of Jacob B., and attended by Mrs. F., a midwife. The mother is 21 years old, healthy, and was delivered of a girl 16 months ago, so that this was her second child.

*Description.*—From an opening 2 inches in length at the umbilical region,  $\frac{1}{2}$  inch to the right of the umbilicus, and parallel to the linea alba, bulged out the greater portion of the intestines. Their coats were hypertrophied, and the abdominal wall was to such an extent contracted as to allow only the admission of the small finger on both sides of the orifice. The rigidity of the abdominal wall did not allow of any stretching. It was an 8 months' child, passed its natural secretion, faeces, and urine. In the morning it vomited bile, and in the afternoon nursed at its mother's breast; its pulse was regular, as also its respiration. The portions out were made up by the duodenum, jejunum, and ileum of the small intestines, and the colon and a portion of the rectum of the large intestines. It died the next day, the 16th November, having lived exactly 21 $\frac{1}{2}$  hours.

*Treatment.*—I was called to the aid of the child at 11 $\frac{1}{2}$  A.M. on the day of its birth. From the time of its birth till then, two inches more escaped. By warm and emollient applications, I succeeded in replacing what had, since its birth, escaped (by crying and bearing down); but to crowd in more of the protruded parts was like stuffing a full bag. If the child was handled and the escaped intestines not disturbed, it was quiet; but if they were touched, it would cry. The specimen could not be obtained, nor was a *post mortem* allowed to be made.

*Remarks.*—Similar cases, although of rare occurrence, occasionally occur: a specimen of ectropium of the bladder can be seen in the museum Chicago Medical College. Judging from the appearance of the fissure, and taking into account the early development of the intestines and abdominal walls, it is very probable that it was a natural defect. At the end of the second month of foetal gestation, the intestines grow much faster than the abdominal walls; so much so, that they are incapable to hold the mass of the bowels, and they protrude, like a hernia. At this time, the growth of the abdominal walls must have been by some cause arrested in this case, and the above condition made permanent; for it was absolutely impossible to find space enough for an insignificant portion of the protruding intestinal mass. Congenital umbilical