

most powerful stimulants, if not the most powerful nervous stimulant that we possess, a small dose of it might have the effect of bringing the depressed nervous system up from the condition of over-fatigue to that of simple fatigue, and thus inducing sleep. I accordingly tried it, and was much pleased with the result. It acted exactly in the manner that I expected, and induced comfortable healthy sleep without any disagreeable effects next day. The way in which I have used it has generally been either in the form of the tincture of nux vomica in doses of 5 to 10 minims or in the form of Schieffelin's granules, containing $\frac{1}{10}$ of a grain of sulphate of strychnine in each. One, two, or more of these granules were given at bedtime, and the dose was repeated if the patient happened to wake within one or two hours afterwards.

I think it is very doubtful indeed whether strychnine would answer in other cases of sleeplessness than those arising from overwork or worry, and more especially from overwork. I have tried it however in a case of sleeplessness occurring in anemia, but as the patient at her next visit complained that the medicine made her sleep rather too heavily, I am not quite sure how mere suggestion may have played a part in effecting the result, nor have I been able as yet completely to eliminate this factor in other cases. The results which strychnine has yielded in my hands being so good, and the condition for which I have used it being so distressing, I have thought it worth while to mention its use as a means of affording sleep in order that others may try it as well as myself, and may, I hope, obtain from it equally good results; although it only too frequently happens that a drug seems to prove very much more effective in the hands of the man who first employs it than of those who try it afterwards.—*T. Lauder Burton, M.D., F.R.S., in The Practitioner.*

SOME USES OF CANNABIS INDICA.—It is in certain conditions in which apparently the use of cannabis is not so well known or widely employed in this country that the writer invites attention.

One of these conditions is anorexia—loss of appetite consequent upon exhausting diseases, such as prolonged fevers, diarrhœa, dysentery, phthisis, etc. This, a very common circumstance in India, causes at times much anxiety to the physician. The stomach suffers from the same debility as the other organs of the body, and there is a repugnance to and intolerance of food in almost every form, which does not always yield to acids, bitters, and nux vomica as usually prescribed. In such cases cannabis indica in small doses (\mathfrak{m} v.-x. of the tincture or gr. $\frac{1}{2}$) of the extract have been found very useful. The former preparation may be ordered in mixture (emulsion), with a small quantity of mucilage and simple syrup, and flavored with

rose-water; the latter as a lozenge or *bonbon*,—the extract being rubbed up with white sugar, gum acacia, etc., to suitable consistency. Such a mixture or lozenge given three times a day, half an hour before meals, will frequently, in two or three days, bring back appetite for food and promote its digestion. I need hardly say that both these preparations are very palatable and readily taken by even fastidious patients.

It is well known that consumers of the drug in India, have, as a rule, voracious appetites,—a fact or indication which appears to have been lost sight of in practical therapeutics.

Another condition is dyspeptic diarrhœa and the diarrhœa which is associated more frequently in the tropics than here, with defective action of the liver and deficient secretion of bile, and which constitutes the earliest and most prominent symptom of that obstinate and specific disease the diarrhœa alba of the tropics (hill or tropical diarrhœa). Speaking more particularly of the latter affection, a characteristic feature is the tendency to action of the bowels soon after meals, and the consequent hurrying of the imperfectly digested food through the intestines, accompanied by remarkable and active vermicular movements of the latter, with much flatulency, borborygmi, etc.

In the earlier stages of this disease cannabis often proves of great service in controlling the diarrhœa. But even in more advanced cases of tropical diarrhœa cannabis will sometimes prove very useful. I have most usually prescribed it in the form of mixture, beginning with \mathfrak{m} x. of the tincture and gradually increasing the dose to \mathfrak{m} xv., xx., or even xxx., three times a day or oftener. A suitable combination is the following:

B.—Tincturæ cannabis indicæ,	\mathfrak{m} x.-xx.
Bismuthi subnitratæ,	grs. x.
Mucilaginis acaciæ,	ʒss.
Spirit. chloroformi co.,	\mathfrak{m} xx.
Aq. cinnamomi vel aq. menth. pip.,	ʒj.
	Misce.

This mixture may be given before or after food, preferably the latter, and more particularly when the dose of the tincture is increased. By exhibition soon after food the liability to unpleasant symptoms (headache, giddiness, hallucinations, etc.) is greatly reduced, even in persons who are very susceptible to these effects of the drug.

In both true tropical diarrhœa and the more simple dyspeptic diarrhœa cannabis has this distinct advantage,—that it in no way interferes with the bile-forming functions of the liver, as opium undoubtedly does; and yet the latter drug, though so valuable in other forms of looseness of the bowels, is apt to be incautiously used, and to my knowledge has been thus used with disastrous results, the proper nature of the above affections and their primary dependence upon altered hepatic function not being rightly comprehended.