

of dresser's forceps, the slip of glass should be held over the flame of a candle. By so doing the albumen, if present, will be precipitated, and rendered plainly visible by the blackening of the glass with the smoke of the candle. This last method should be practised with care, as, if the glass is held too close to the flame, violent ebullition of the urine takes place, with rapid evaporation. The value of the use of these thin glass covers for this purpose consists mainly in the ready way in which the urine can be tested by means of them. It is very easy to carry a few of them in the pocket-case for use by those who prefer the warm method of testing; the urine cold with the acid, a box could easily be contrived which would carry one or two blackened covers and some nitric acid.—*Med. News.*

TETANUS—FREE USE OF CHLORAL AND BROMIDE—RECOVERY.

C. G., aged eleven years, entered the Massachusetts Gen. hospital with an injury to the right arm, received half an hour previously. The wound made by a carding-machine, was a superficial tear in front of the elbow-joint. A flap of skin of the size of the palm of the hand had been completely wrenched away from the inner angle of the arm, exposing the superficial muscles and nerves, one or two of the latter lying torn and bare in the wound. No vessel of any size was wounded, and the elbow-joint was uninjured. The arm was placed on an external angular splint, and the wound dressed with simple water dressing. All went well till the fifth day, when the wound and parts adjacent became swollen and inflamed. A poultice was applied. In two days the inflammation and swelling had subsided, but the wound looked dirty and was covered with tough, adherent sloughs. A dressing of "acid-wash" was substituted for the poultice. The look of things now speedily improved, and in two days the wound was clean and healthy. The first sign of tetanus was noticed August 27th, thirteen days after entrance. Complaint was first made of stiffness in the jaws, pain in the back of the neck, and much difficulty in chewing and swallowing food. There was no marked febrile disturbance. A blister was applied to the inner side of the arm above the wound over the course of the nerves, and enemata of ten grains of bromide of potassium and seven grains of chloral hydrate in one ounce of water were given every three hours. The next day there was no improvement, the patient not being able to open his jaws more than an inch, and having cramp-like pains in the calves of his legs. Another blister was applied to the arm, and also to the neck over the course of the brachial plexus of nerves. The chloral and bromide were increased

to fifteen grains of the former and twenty grains of the latter, given in enema as before, and the wound was dressed with a solution of chloral hydrate, ten grains to the ounce of water. For several days the condition of the boy gradually grew worse; a marked but intermittent tendency to opisthotonos soon showed itself, and his tongue was several times badly bitten by spasmodic closure of the jaws. He was given stimulants, but in the way of food could take nothing but liquids and semi-solids. The enemata of chloral and bromide were given as occasion required, sometimes oftener than once in three hours, so as to keep the boy completely under their influence, in fact almost narcotized. As long as he was thus kept the spasmodic contractions of the muscles were controlled, the patient being drowsy most of the time. Any source of irritation, however, such as the endeavor to take food or being moved or handled, was almost sure to bring on an attack of muscular contraction, more especially in the muscles of the jaws and of the back of the neck. The tendency to opisthotonos became more constant, the boy lying in bed with his back slightly arched. After the first few days he showed the erythematous blush of the skin due to the influence of the chloral, and at times his pulse became very rapid and his pupils contracted. On September 6th, ten days after the appearance of the disease, there began to be some diminution in the violence and frequency of the spasms, and some improvement in the general subjective feelings of the patient. On the next day, however, his mother, contrary to the most strongly expressed advice, insisted on taking the boy home. About a month afterward she reappeared with him. He had entirely recovered, after having had several attacks of muscular spasm since leaving the hospital. Throughout the whole of the disease the wound looked well, and was almost entirely healed when the boy came back.

In ten days this boy, aged eleven years, had of chloral hydrate eight hundred and five grains, and of bromide of potassium one thousand one hundred and fifty grains, being an average of eighty grains of the former and one hundred and fifteen grains of the latter every twenty-four hours.—*Boston Med. Jour.*

EXCISION OF THE HEAD OF THE HUMERUS.

The following clinic by Prof. Gross, we copy from the *Philadelphia Med. Times*.

"The patient now before you is a medical gentleman, 26 years of age, who, three years ago, was thrown from his buggy on his right shoulder, receiving a severe contusion, followed by the usual symptoms of inflammation. You observe a cicatrix situated about the middle of the arm, at which, as