morphia and atrophia by hypodermic injection is the most efficient remedy, though a host of sedative remedies has been tried. Ferrand's experiments show that glycerine, in doses of 5v. to 5j., is capable of provoking a free secretion of fluid bile; and also that such doses are prompt in alleviating the pain. Olive oil, in doses of 5vi. to viii., given in two portions, quarter of an hour apart, the patient lying upon the right side, is safe and well tolerated by the stomach, and in some cases produces prompt relief. (The inspissated portions of oil which pass after such doses must not be mistaken for gall-stones.)

Prophylaxis.—For this purpose active exercise, massage, cholagogues and gentle saline aperients are useful. Over-eating or the indulgence in rich foods should be avoided. A course at some of the hot sodium or magnesium springs acts efficiently in some cases. Surgical interference gives good results in a large majority of cases. It may be demanded in acute cases with rupture of the ducts or gall bladder.

In Chronic Cases for the Removal of the Cause.—Cholecystotomy and removal of the obstructing stones, though not dangerous with perfect surgical technique, has the disadvantage of leaving a fistula, which may take a length of time to heal. Cholecystoenterostomy by the Murphy button is giving very good results, and very few failures are reported. Crushing of the obstructing stone in the duct is condemned on account of the injury to the duct; cutting the duct open, removing the stone and suturing the duct is to be preferred. The escape of bile into the peritoneal cavity, whilst it obscures the field of vision, does not prevent healing. Cholæmia favors bleeding, and has a very unfavorable effect upon the operation.

The most favorable cases for operation are amongst the younger patients, when they are not exhausted by repeated attacks.

Cases of cholelithiasis after operation do not form an extensive part of the literature of the subject.

The Dress Regulations and Medical Officers of the Militia.

In view of the report which is current, that the medical officers are to be obliged to purchase uniforms as now worn by the Imperial Medical Staff, we desire to urge upon the authorities that such an order be not made retroactive, but that medical officers be allowed to wear the uniform of the corps to which they may now be attached. In the event of the creation of a Departmental List, those officers who signify their desire to serve on such a list may then be so uniformed.