The test ought to be made before the filtering paper becomes quite dry, as the colours will be exhibited more intensely.

The different colours as described remain sometimes for hours, so that they can be readily demonstrated to a class. The ordinary colouring matter of the urine will give no such reaction as that described.

From Union Medicale du Nord-Est.

SUBCUTANEOUS INJECTION OF DEFIBRINATED
BLOOD—CURE.

BY DR. SCHMELTZ DE SCHLESTADT.

This observation clinically demonstrates that Karst (of Kreusnach) was not deceived in prophesying, from his experiments on rabbits, that subcutaneous injections of blood would (one day) be made in cases of profound anæmia in man. Schmeltz operated upon a man whohad arrived at a state of extreme weakness, with hectic fever and alarming thoracic symp-He introduced beneath the skin forty grammes of defibrinated human blood, divided into eight injections of five grammes each. The blood-swellings were absorbed at the end of two days. The patient recovered strength with considerable rapidity. This operation is certainly harmless, and it is probable that it will be able to render essential services; true, it is not known what quantity of hæmoglobuline is absorbed, and what quantity remains in the tissues at the point of injection. Later experiments will doubtless show this .- Gaz. Med. de Strasbourg.

From Gazette Medicale de Strasbourg.

The same author (Dr. Schmeltz) records in the Gaz. Med. de Strasbourg, for June, a case of pelvic peritonitis, followed by obstinate vomiting and collapse, cured by subcutaneous injections of sulphuric ether. After describing the case up to the occurrence of collapse he goes on to say, "In spite of the means usually employed in such cases, we were totally unable to set up reaction; this condition lasted the whole of the following night. The next morning all consciousness was lost, and death seemed imminent. I then made a first hypodermic injection of fifteen drops of sulphuric ether, according to the

directions of M. Verneuil. The prick was not felt, and yet in half a minute after the patient began to stir and to utter a faint cry. An hour atterwards another injection also of fifteen drops was given, followed in about a minute by another and a little stronger cry. Towards evening our moribund patient revived." The case subsequently did uninterruptedly well.

Apropos of this case, Dr. Schmeltz observes: "I believe that injections of ether are harmless; in fact an Englishman, Dr. Macan, has lately injected eight grammes of it at once, and shortly after four grammes more (acetic ether), a thing which I would be altogether inclined to do in urgent cases, such as after post-partum hæmorrhages."

At the Societe de Medecine de Strasbourg the following remarks were made upon the two foregoing cases:

"Prof. Boeckel says he regards the use of hypodermic injections of defibrinated blood as rational in cases in which transfusion appears to be indicated. It is known, in fact, that blood globules injected directly into the circulatory current are there for the most part rapidly destroyed and eliminated from the system. It is not then to this essential part of the blood exclusively that we must refer the results obtained by transfusion, and we may admit that the elements of which the serum is composed—elements eminently fitted for absorption—play some part in the useful effects which have been observed in these cases.

"As for hypodermic injections of ether, he has used them for some time, without having always obtained very marked results from them; only, instead of sulphuric other, he employs nitric ether, which, on account of its slighter volatility, is more convenient to handle. M. Herrenschmidt has recourse to subcutaneous injections of Hoffman's Anodyne (in doses of one-half to one gramme each) in severe collapses, when the administration of stimulant medicines is no longer possible, or is useless. These injections are usually followed by a certain return of the natural powers, but these effects have always been very transient."