

become deadened. The acid nitrate of mercury is a very valuable preparation, and has the advantage of not forming so dark a crust. It is peculiarly suited for small, not very sensitive ulcers and tubercles. It may be brushed with a glass brush over the part, and should be used at first diluted with water till the full strength can be borne. When applied, a basin of water should always be at hand, and so soon as ever the pain begins to be felt the surface should be freely washed. The yellow nitrate of mercury may also be used in the form of ointment made with the lard as prepared by Mr. Squire. It is chiefly adapted to those cases where there is only slight or superficial ulceration, and to the lupoid form of syphilis. It answers very well for those patients who cannot well have anything applied which produces a visible mark. These are the only external means in which I feel any confidence, and even these I look upon solely as so many aids to external treatment. If they are relied upon, both patient and surgeon must lay their account to the possibility, nay, even the great probability, of a relapse. Mr. Hunt, who has had a very extensive practice in these diseases, says the practice of using caustics is not only barbarous but useless, and M. Rayer distinctly says that whatever caustic may be used it must always be repeated often twenty or thirty times. Dr. Parkes, a most able and careful observer, entertains a very indifferent opinion of their value. It is true that views utterly opposed to these have been held by very good surgeons. Mr. Liston, for instance, thought that local treatment was alone to be depended on, and always used the chloride of zinc unsparingly. Mr. Gay, too, has seen the best results from the use of the pernitrate of mercury in lupus exedens. Professor Bennett seems to entertain a similar view. M. Cazenave thinks there is nothing like biniodide of mercury suspended in oil; but he admits that its action is very painful. Professor Hardy also clings to the biniodide. Mr. Wilson uses caustics, though he expresses himself very guardedly. Dr. Hillier eulogizes the iodide of starch, recommended by Mr. Marshall; he says its use is almost unaccompanied by pain. Dr. Frazer says that whatever medicine be given, local treatment is still of primary importance. Dr. Danzel, of Hamburg, looks upon solution of hydrochlorate of gold as more powerful and less painful than other caustics. Still it is clear, from what he says, that its operation is most severe. He uses a solution from half a scruple to a scruple in a drachm of distilled water, and works it deep into the bed of the ulcer by means of a fish-bone or glass style. Hebra relies upon the solid nitrate of silver, freely applied, and iodized glycerine; the latter being principally employed in the erythematous form. Cod-liver oil is almost his sole internal remedy.—“*On the Treatment of Lupus*,” by J. L. Milton.

CHLORAL HYDRATE AND CAMPHOR: CROTON-CHLORAL.

Last year (*London Medical Record*, May 7, 1873) attention was drawn to the fact that the intimate mix-

ture of equal parts of chloral hydrate and camphor will produce a clear fluid, which is of the greatest value as a local application in neuralgia. I have now employed this preparation for several months, and have induced many professional friends to use it also. Having in every case found great, and often instantaneous, relief follow its application, I think the members of the Association may be glad to have the opportunity of adding to the very uncertain stock of anti-neuralgic remedies which we have already at our disposal. Its success does not appear to be at all dependent on the nerve affected, it being equally efficacious in neuralgia of the sciatic as of the trigeminus. I have found it of the greatest service in neuralgia of the larynx, and in relieving spasmodic cough of a nervous or hysterical character. It is only necessary to paint the mixture lightly over the painful part, and to allow it to dry. It never blisters though it may occasion a tingling sensation of the skin. My friend Mr. George Wallis allows me to say that he has found it of great service as a remedy which patients can apply themselves for the relief of toothache; and to its success in this respect I can also personally testify. In the original article, the compound was recommended for arresting the progress of incipient boils and carbuncles. I have no experience of its value for this purpose.

The question of “An American Inquirer” in the *JOURNAL* of last week, as to the dose of croton-chloral, is one on which there is very considerable and general doubt since practitioners have frequently confused the dose prescribed by Dr. Oscar Liebreich for sleeplessness with that which should be given simply for the relief of neuralgic pain; and even for these two purposes the amount advised by different physicians varies considerably. Dr. Liebreich thinks that sixty grains may be safely administered as a single dose; while Dr. Burney Yeo (*Lancet*, Jan. 31, 1874) does not consider it safe in any case to go beyond fifteen grains, and advises that this amount be administered in doses of two to five grains every hour or half-hour until the desired effect be produced or the maximum be reached.

Considering croton-chloral as a hypnotic, I do not find that it has any advantage whatever over chloral hydrate, while it is from ten to fifteen times as expensive. I have occasionally found the effect of chloral hydrate increased by addition of croton-chloral, in the proportion of five grains of the latter to fifteen of the former. This combination is especially serviceable in cases of spasmodic asthma occurring during sleep. The sleep produced by the combined drugs is much deeper than that produced by ordinary chloral; but on awaking, there is frequently considerable stupor and headache. I have observed these same symptoms after administration of smaller doses of this combination, when taken for the relief of spasmodic cough, while the simple chloral hydrate has produced no such effect in the same patient whether taken in the smaller or larger dose. One of the greatest disadvantages of croton-chloral is the uncertainty with which it acts since it is decidedly most serviceable in cases of neuralgia and of spasmodic cough—cases in which speedy relief is of the greatest importance. Thus, while hourly doses of one grain will produce the best results in one