up to the present. On a subsequent occasion the writer may venture to give publicity to views and opinions he now entertains on the causes and pathology of this indigenous and fearfully destructive enemy of the Caucasian race, as found in the larger cities of this continent.—*Philadelphia Med. Times.*

BALTIMORE, July 9, 1874.

INHALATIONS IN ASTHMA.

℞ Ætheris sulph., pts. 30;
Acid. benzoic., " 15;
Bals. Peruvian., " 8;

or, according to another formula,

℞ Ætheris sulph., pts. 2;
Sp. terebinthinæ, " 15;
Acid. benzoic., " 15;
Bals. Peruvian., " 8,

Place the mixture in a vessel having a large opening; the warmth of the hand is sufficient to volatilize the materials, and inhalations may be used four or more times a day as occasion demands.

FOR PAINFUL HEMORRHOIDS.

℞ Ext. hyoscyam.,
Pulv. saffron, aa ʒ ijss;
Plumbi acetat., ʒ i;
Glycerole of starch, ʒ i.—M.

ULCERATION OF THE NOSE IN SCROFULOUS CHILDREN.

M. Galezinsky is accustomed to treat ulcerations of the cutaneous surface generally in these cases by dusting them with calomel, with appropriate internal treatment. When similar ulcerations form in the nares, he recommends similar applications, or occasionally the following ointment:

℞ Hydrarg. ox. rub., gr. iv;
Camphoræ pulv., gr. iss;
Axungiæ ʒ i.—M.

CHLORAL IN CANCER.

At a recent meeting of the Société Thérapeutique, the efficacy of chloral in cancer was pointed out by Dr. C. Paul, who had used it in the shape of suppositories containing fifteen grains. Introduced into the vagina, they had produced sleep during the whole night, in cases where considerable doses of morphia had no anodyne effect, while the nature of the secretions, and especially their fetor, were favorably midified. Dr. Martineau mentioned a case of recurring cancer of the breast, which had almost reached the thoracic walls and the lung. Pledgets of lint, steeped in a solution of chloral, were introduced. Three days after, the surface had assumed a healthy hue and was granulating kindly, the fetor had vanished, and the hemorrhage stopped. Cancer of the uterus had likewise improved, so far as the plan and fetor were concerned, under similar treatment.—*New York Medical Record.*

SOME POINTS IN THE TREATMENT OF CHILDREN'S DISEASES. (*a*.)

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(*a*) Read before the Medical Society of London, March 16, 1874.

We are all familiar with the fact that the treatment of disease in children presents points of difficulty demanding special acquired knowledge for their solution, which knowledge can only be attained by careful observant experience, and by the attentive consideration of numerous cases. Such then being the case, it may not be altogether out of place to review here some points to which the speaker's experience has strongly attracted his attention, and on which, therefore, he has something to say that may fitly open and direct the discussion about to follow and to which this paper is but an introduction.

In the first place we must recognise the fact that the period of life now under discussion is that of growth, when nutrition is active, and tissue development is progressive. In consequence of this rapid growth, a child requires at frequent intervals supplies of easily digestible food, even in health. In disease, when the powers of the system are being tested, this question of feeding assumes a momentous importance. The food must be such that the digestive powers of the child, enfeebled during the actual prevalence of acute affections, can assimilate it. If such assimilation be impracticable, the food, instead of going to the aid of the patient's powers, remains a burden, entailing so much effort for its removal. The administration of so much food, by coaxing or otherwise, is not the equivalent of so much actually digested. The question of how much will probably be actually assimilated must guide us in our line of dietic treatment. When convalescence is once well established, the digestive powers of children are something stupendous.

The nervous system of children is very susceptible, especially to depressant remedies, and in acute and febrile affections the stage when such remedies are desirable is but a brief one, quickly passes into a stage where mineral acids are the safest refrigerants and tonics. Frequently a small quantity of suitable food will lower the temperature, and beneficially affect the febrile condition—a fact which must often have struck close observers.

While we cannot recognise too distinctly the importance of nutrition and support in the treatment of sickness in children, we must not forget the fact that there exists in the minds of mothers and nurses very frequently, if not indeed generally, a strong feeling that nutritive food or drink will increase the inflammation, or add to the fever. Hundreds of children have perished, the victims of this ill-founded apprehension. They have died down from inanition in the too-careful avoidance of the risk of increasing the inflammation. Vain fear! fraught with mischief; it has still to be combated. There is no better test of a medical man's capacity to treat disease than his power to foresee that in one or two