

not advance; and it is equally evident that, if it were placed on a scientific basis, nothing could be more conducive to the death of all quackery. The latter could not exist if the prescribing a medicine implied a knowledge of its action and the proper occasion for its employment.—*Dr. Wilks, in British Medical Journal.*

ISOLATING MEDICATION.—In the closing portion of a book recently issued in Paris by Chevalier Robert de Latour, entitled "*De la Chaleur Animale*," there is proposed a system of treatment which seems worthy of being noticed. The method is applicable especially to superficial inflammations, but by its author is asserted to be of almost equal value in the treatment of such deep trunkal inflammations as peritonitis and pleurisy. The idea of the plan is the formation of an impervious coating upon the surface of the body over the seat of the inflammation, the theory being that such coating will check the processes of oxidation in the capillaries beneath it. Under many circumstances, collodion suffices for the coating, but the form of the collodion should be that which is known in the U. S. Pharmacopœia as flexible collodion,—i. e., that which contains castor oil. For many purposes Dr. Latour prefers, even to flexible collodion, a preparation made according to the following formula: Take of gelatin, white sugar, and gum arabic, each thirty parts (by weight), honey and glycerine each ten parts, and water 190 parts. Mix; then boil with an equal part of water, when a very thick plastic mass is formed, which is to be spread over the surface. Among the diseases in which this method of treatment is especially praised by the author is orchitis. He affirms that a single dressing, combined with the use of a suspensory bandage, often suffices when the affection is acute, and even in the chronic form the result is almost certain if the application be persisted in. The dressing must be renewed under these circumstances daily. In erysipelas these results are stated to be most satisfactory, and cases are given of the most malignant type in which the effect of the application was immediate. In peritonitis, the dressing is spread over the surface of the skin, corresponding to the portion of

peritoneum affected, and is affirmed to act with a "marvellous promptitude." In rheumatism and in acute gout the author states that for forty years he has used "the isolating medication" without ever an accident, and with the utmost relief.—*Therapeutic Gazette.*

INTESTINAL VERTIGO.—"Vertigo a stomacholæso," has been especially recognized since the time of Trousseau. M. Leube describes an analogous intestinal vertigo. This is not, however, altogether new, as in children suffering from worms vertigo is common—ceases on their expulsion. M. Leube has observed patients suffering from intestinal troubles in whom vertiginous sensations disappeared on the passage of gas. The first patient suffered from obstinate constipation, accompanied by vertigo whenever the intestines became distended by gas or fecal matter; the vertigo disappeared as soon as he had a free passage. He was cured by rhubarb. Rectal examination caused violent vertigo. The second patient had attacks of vertigo when sitting; he had none when walking or lying down; efforts at defecation were especially dreaded. In this patient vertigo only occurred after rectal examination. In the third patient, suffering from chronic intestinal catarrh, the vertigo came on some hours after meals. He also suffered from tympanism. A single rectal exploration brought on vertigo lasting fully five minutes, although there had been none for five weeks. It is therefore certain that there is a vertigo of intestinal origin, caused by pressure on the last ramifications of the sympathetic, either by gas or by the finger in rectal examinations.—*Deutsch Arch. of Klin. Med.*—*L'Union Médicale.* R. Z.

CASES OF ALBUMINURIA TREATED SUCCESSFULLY BY FUCHSINE AT THE ROYAL INFIRMARY, WIGAN.—William R., aged 49, a collier, was admitted on May 8th. He had never suffered from any previous illness, and said that he had been a moderate drinker.

There was extreme anasarca of the head, face, and legs, and ascites; the tongue was coated, the breath very foul, and the skin hot and dry. On inquiry, he said he had been