

many cases karyokinesis may be seen. Brought by the blood the micro-organisms are retained in the spleen, lymphatic glands, and medulla of bones. Here, and especially in the spleen, the fight takes place between the leucocytes and microbes (phagocytosis). The hyperplasia of the spleen and other blood-forming organs is thus the result of the reaction of the individual against the poison circulating in the blood. For this reason extirpation of the spleen must be quite unwarrantable.—*The British Medical Journal*.

TREATMENT OF METRORRHAGIA.—In certain cases of obstinate metrorrhagia, ergotin, extractum hydrastis Canadensis, ice, and applications of tampons are alike incapable of arresting the hæmorrhage. In such cases a hypodermatic injection of sulphate of atropine has been recently recommended. It is given in doses of $\frac{1}{60}$ grain twice daily. In one case in which the hæmorrhage had existed for a fortnight, it was completely arrested after a fourth injection. In a second, when the patient was in a state of collapse, the first injection was followed by a return of the normal temperature and increase of the pulse-rate; after the second the hæmorrhage was diminished in a striking degree; after the third it entirely ceased. A moderate dilatation of the pupils was the only secondary effect observed.—*The Provincial Medical Journal*.

INJECTIONS OF ALCOHOL IN UTERINE CANCER.—Hauffer and Schultz (*Journ. d'Accouchements*) report that since June, 1891, ten patients subject to cancer of the uterus have been treated by this method, and the results have hitherto proved satisfactory. The patient is placed in Sims' position. The urethral orifice is covered with wool. The instrument used for the purpose is five times as large as the well-known Pravaz's syringe. Absolute alcohol is employed. The point is made to penetrate 1 inch deep into the tissues. About two syringefuls are injected at one sitting. Most of the alcohol returns during the process of injection, carrying with it much detritus. Some of the patients complained of pain, especially when the needle was forced in far; but the pain was always transitory. A plug of antiseptic gauze is always introduced after the

injection. At first the syringe is used every day. In some cases thirty, forty, or more injections were given. Sometimes smart hæmorrhage was set up, but this was always easily controlled. The local and general effects of the treatment have hitherto proved satisfactory. The pains, discharge, bleeding, loss of appetite, etc., all diminished or disappeared. In some cases a growth of apparently healthy epithelium appeared on the previously raw, ulcerated surface of the cervix. In the first case the improvement was maintained four months after the treatment was left off. In some the method was employed when the uterus was already fixed or the parametrium invaded, and with satisfactory results. Hauffer and Schultz promise to publish further information on the after-histories of their cases.—*The British Medical Journal*.

EUROPHEN.—O. V. Petersen, of St. Petersburg (*Fratch*), tried euophen in (1) 25 cases of circumcision. The wounds were powdered with the pure drug and dressed with sterilised gauze, etc., the dressings being changed every day or two. In all but three rapid healing by first intention was obtained, in the remainder the wounds gave way in from two to four days after the operation (in two from violent erections, in one apparently in connection with supervening influenza). (2) 20 cases of soft chancres; in 19 of them the ulcers were simply wiped with a piece of absorbent cotton wool and powdered with the substance from 1 to 5 times daily. In one of the cases (a patient with recurrent syphilis), the lesions healed in three weeks, but in the other 18 in from 12 to 15 days. In the twentieth case the application of euophen was preceded by scraping out the chancres. On the removal of the dressing on the fifth day the ulcers were found firmly healed. (3) 7 cases of hard chancres, and (4) 3 of ulcerating gumma, good and fairly quick healing took place. (5) 2 cases of suppurating buboes—after incision and scraping out, the cavity was powdered with euophen and a compress applied for seven and nine days respectively. Good union resulted, though in one of the cases dermatitis of the surrounding skin occurred. (6) A case of whitlow was cured in seven days (with two dressings). On the whole the author thinks that euophen is a useful substitute for iodoform in minor surgery and