

Indeed, throughout his whole sickness, a dejection rarely occurred except after an enema or a laxative. Soon after taking an enema, in the evening of April 25th, he apparently fell asleep, and died.

His death occurred about eleven weeks after I first saw him, and about fourteen weeks after the commencement of the difficulty in his ear.

Autopsy.—The head was examined thirty-six hours after death, by Dr. Calvin Ellis, who sent me the following report of the examination :—

"Dura mater much more vascular than usual. Arachnoid without the ordinary moisture. Convolutions of the upper surface of the brain flattened, as were also the elevations of the medulla oblongata. After the removal of the dura mater, the portion of the right hemisphere above the temporal bone bulged out in a remarkable manner, and was very soft to the touch. An incision showed white softening which extended nearly to the posterior part of the hemisphere, and quite extensively in all directions around an abscess situated above the petrous portion of the temporal bone, of sufficient size to hold about two ounces of thick pus. The lateral ventricles contained considerably more serum than usual. The septum lucidum and walls were softened.

"At the base of the petrous portion of the temporal bone, on the right side, the inner table, to a limited extent, was destroyed, and at this point the dura mater adhered. The cells in the interior of the bone contained more moisture than those of the opposite side, and had a reddish tinge. The tympanum and ossicula remained."

• My own notes of the examination say that the portion of diseased bone above described was adjoining or nearly over the tympanum and that the aspect of the tympanum was healthy. The brain, except around the abscess, was normal.—*Archives of Practical Medicine, January, 1873.*

DAVIS ON FLUID EXTRACT OF CASTANEA VESCA (COMMON CHESTNUT) IN PERTUSSIS.

Dr. Thomas D. Davis (*Philadelphia Medical Times*, Dec. 28, 1872), whilst resident physician of the Philadelphia Children's Asylum, at the suggestion of Dr. Parry, treated fifteen cases of whooping cough with this remedy. The paroxysms were very severe in all the cases, and frequent in most (varying from five to twenty-seven in the twenty-four hours.) In four cases there was no whoop. The patients had been treated with belladonna, but this was discontinued two days, and every case became decidedly worse. They were then given the fluid extract of the common chestnut leaves, and each case decidedly improved on the first day of treatment. The characteristic cough ceased in one case on the second day, in four cases on the third day, in six cases on the fourth day, in ten cases on the fifth day of treatment; the paroxysms in the remaining four cases occurring only twice in three cases, and only once in two cases on this day (5th). 'The nurse in charge, who had witnessed many epidemics of this disease, declared she had never seen a medicine act like it.' The medicine is made from the leaves gathered from July to October, those gathered late in the season

being preferred. The medicine may be administered as an infusion syrup or fluid extract. Dr. Gerhard, of Philadelphia, who highly praises this remedy, prefers the fluid extract made by Mr. John M. Maisch, from the following formula :—'Chestnut leaves dried' (why not from the fresh leaves?) 'cut and bruised, sixteen ounces, glycerine five ounces, sugar eight ounces, and hot water a sufficient quantity; the extract to measure sixteen fluid ounces.' The dose is half a teaspoonful to a teaspoonful every three or four hours for a child six years old. This remedy is praised by Mr. George C. Close, of Brooklyn (*American Journal of Pharmacy*, 1863), by Dr. J. Unzicker, of Cincinnati (*Medical and Surgical Reporter*, Oct. 26, 1867), and by Dr. J. Ludlow (*Cincinnati Lancet and Observer*, March 1869, p. 147, and *New York Medical Journal*, April, 1869). Dr. Davis remarks that the cases were at their height at the time the remedy was commenced when an improvement might be expected, but he considers (no doubt correctly) that the improvement was too rapid to be owing to a natural decline of the disease; a conclusion confirmed by the fact that on discontinuing the belladonna every case grew worse, but immediately improved again on the employment of chestnut leaves. All the reported cases occurred in the same epidemic during the winter of 1870. The chestnut leaves have been used for many years as a household remedy.

[Dr. Foster, of Huntingdon, and Dr. Howard Sargent, of Boston, recommend clover in whooping cough. Dr. Sargent gives occasionally through the day a wineglassful of an infusion made with two ounces of carefully dried blossoms of red clover steeped in a pint of boiling water for four hours. The mawkish taste is concealed by adding some liquorice root to the infusion. The writer employed this remedy during an epidemic occurring in a Yorkshire village in Aug. 1872 (an old hemiplegic man over seventy was attacked, and recovered, but he did not take this remedy), with decided success; afterwards he employed an infusion and tincture made with the dried and fresh flowers in London with less advantage. Dr. Inman has suggested that locality may exercise an influence on the efficacy of remedies.]

FIBROID TUMORS OF THE UTERUS.

Alfred Meadows, M. D., London, England (*Am. Jour. Obstetrics*), in his "Remarks on the Diagnosis and Surgical Treatment of Fibroid Tumors of the Uterus," says that, having determined the situation of the tumor and its interstitial character, one is justified in attempting the removal of these tumors even though they be not intra-uterine or submucous, but are situated in the substance of the uterus itself, provided a proper canal be inaugurated. His plan is, first of all, to prepare the passages for the expulsion of the growth, and secondly, to detach the tumor from as much of its surroundings as possible, so that, by making of it a foreign body, nature may aid in its removal, as she would in the case of a dead fetus or mole-pregnancy, or