in the relief of various symptoms. An occasional dose of opium at night, where there are irritability and restlessness, may be given, not to lock up the bowels, but with a view of procuring sleep. A dose of castor oil guarded with laudanum, is often of service in bringing away scybalous fecal matter that has been retained, and caused griping and distress. For the tenesmus from which some patients suffer so much, an injection of starch and opium is the best remedy. The possibility of irritation being kept up by hemorrhoids must not be lost sight of. The severe and oft-repeated straining in the earlier stages of the disease gives rise at times to prolapsus ani, which in the more advanced stage may become a source of annoyance, and require surgical aid.

The complexion and course of chronic dysentery may be modified by the association of some special cachexia, as that of scurvy, ague, or tuberculosis. Where such exists the treatment will have to be modified. Where there are evidences of scorbutic taint, lime or lemon-juice must be given. It is here that the Bael fruit, which has enjoyed so much repute in India, will be found useful. If there be any old malarious influence at work, the symptoms will exhibit periodicity—the patients will perhaps be worse on alternate days, and then quinine will be the remedy. Where cough, hectic, etc., point to the tuberculous diathesis, cod-liver oil and tonics are indicated.

GLYCERINE OF BORAX IN FACIAL ERYSIPELAS.

Prof. D. M. Salazar, of the Hospital Nacional, Madrid, reports that he has cured eight cases of facial erysipelas in 48 hours by this remedy. Notwithstanding the rapidity with which the affection disappeared, there were no consecutive pathological affections. In one case, the disease had existed three days before treatment was commenced, and there was bilious vomiting, intense cephalalgia, high fever, inflammation of the entire face, and some phlyctenulæ in the vicinity of the right lower eyelid and the root of the nose. He applied the solution to the diseased parts with a brush and then covered them with a mask of raw cotton. After 24 hours all the symptoms, local and general, were notably diminished, and the next day all the phlyctenulæ had disappeared and desquamation was commencing.—*El Amfit. Anat. Espan.*, Mar., 1873.

CROUP.

Dr. W. W. Parker, of Richmond, Va., (*Virginia Clinical Record*), relates a case of croup in which inhalations of lime proved efficacious. The most dense vapor is not at all unpleasant, and can be borne as well as the ordinary atmosphere of a heated room.

RUPTURE OF THE ŒSOPHAGUS.

Dr. James S. Bailey, of Albany, N.Y., (*Phil. Med. Times*), reports the history and post-mortem appearances in a case of rupture of the œsophagus occurring near the cardiac orifice of the stomach, causing collapse and death in twenty-four hours from its occurrence. In this case the accident was probably due to a violent fit of vomiting. The lesion in a sound œsophagus is a rare one. Von Oppolzer reports having seen but one case.

IODIDE OF POTASSIUM IN SYPHILITIC SKIN DISEASES.

Dr. McCall Anderson (*Med. News and Library*) lays down the following rules with regard to the employment of iodide of potassium in the treatment of syphilitic skin diseases:—

1st. The longer the interval which has elapsed between the contraction of the syphilitic taint and the development of the eruption, the more confidently may we substitute it for mercury.

2d. If the patient is cachectic, it is, as a rule, to be preferred to mercury, except in recent cases of syphilis, when the mercurial vapor bath, or some such treatment, is more likely to prove successful.

3d. The more extensive the tertiary eruption, the more certain it is to yield to the iodide of potassium; although to this rule there are numerous exceptions.

4th. If there is any tendency to syphilitic disease of the nostrils or neighboring parts, iodide of potassium should be withheld, or given with great caution, for, if it produces coryza, it is very apt to aggravate the morbid condition of the parts.

5th. It should be given in full doses.

It is generally advisable to prescribe it in combination with a bitter, and, in cachectic patients, a little iron is a valuable addition, as in the subjoined prescription: Ammonio-citrate of iron, ʒ iij.; iodide of potassium, ʒ i.; syrup of ginger, ʒ vi.; comp. inf. of gentian, ʒ viij.; water to ℥ xxiv. A table spoonful in a large wine-glassful of water, thrice daily.

COMBINATION FOR CHRONIC DIARRHŒA.

Rayer (*Union Medicale*, No. 73) advocates the combination of cinchona, charcoal, and bismuth in the management of chronic diarrhœa in these proportions: Subnitrate of bismuth, ʒ j.; cinchona, yellow, powdered, ℥ ss.; charcoal, vegetable, ʒ i.; M. chart. xx. S. Two or three times daily during the intervals between meals.

THE TREATMENT OF WHOOPING-COUGH.

By W. Berry, L.R.C.P. and L.R.C.S. Edin.

(*Medical Times and Gazette*, Feb. 28.)

Mr. Berry has found dilute nitric acid, in doses of from five to fifteen minims—according to age—with simple syrup, given every three or four hours, to alleviate the cough and spasm, and apparently cut short the disease.

TREATMENT OF PYROSIS.

By J. Braden, M.R.C.S.

(*The Lancet*, Feb. 22.)

For the treatment of pyrosis, Mr. Braden recommends ten grains of subnitrate of bismuth, with five grains of the compound kino powder, suspended in thin mucilage, three times a day.