

DRS. D. J. G. WISHART and P. J. Strathy have been appointed Assistant Demonstrators of Anatomy in the Trinity School of Medicine.

DR. ANGUS GRAHAM, Dorchester, has been appointed Associate Coroner in Middlesex.

## Therapeutic Notes.

**TREATMENT OF WHOOPING COUGH.**—According to *Archives of Pediatrics*, September, 1891, the following are the present plans adopted in Europe.

*Scilla oxymel.*—Since Dr. Netter reintroduced this treatment in 1886, it has been constantly used in children's hospitals in France as well as in private practice. It certainly diminishes the number of attacks of cough and makes them shorter in duration. Expectoration is made more abundant and more fluid, while vomiting is soon stopped. It is given in twenty to sixty-drop doses to babies. In older children five to six tablespoonfuls is given between five and six p.m., and no food is given from three to seven p.m.

*Antipyrin* is the English idea. Dr. Crozier Griffiths believes that antipyrin only fails when not given in large doses, and finds that children stand them well. A baby of four months was given one-half grain every three hours, and on the fourth day, there being no improvement, he gave one grain every three hours, and in forty-eight hours the child was well.—*Virginia Medical Monthly*.

**IODIDE OF POTASH IN DIPHTHERIA.**—After several years' hospital treatment by this means, and also in private practice since, Senenko (*Rundschau*, August, 1891) recommends it most highly, as he has not lost a case since he has adopted this method. Adults may be given one-half to one drachm of iodide of potash daily; children, one-half the quantity. It should be given every three or four hours till iodism appears, or the membrane begins to come away, which takes place in from two to four days. If symptoms of heart-failure are recognized, it must be overcome by whiskey. Painting the throat is irritating, and should not be allowed; whereas, on the other hand, steam in-

halations of a three per cent. solution of boracic or salicylic acid is highly recommended. The sub-maxillary glands should be rubbed daily with oleate of mercury.—*Virginia Med. Monthly*.

**DONOVAN'S SOLUTION IN GLEET.**—The solution of the iodide of arsenic and mercury is said to be of material service in the treatment of gleet. A correspondent of the *Medical Record* feels that he is justified in calling this remedy almost a specific for gleet, so uniform has been his success with it. It should be given for this purpose, in doses of ten minims, three times daily.—*Atlanta Med. and Surg. Jour.*

A GREAT objection to the use of antipyretics in typhoid and other fevers is that they diminish the quantity of urine excreted, and thus tend to prevent the elimination of the toxins which are produced in such quantity by pyrexia.

DUJARDIN-BEAUMETZ says that in cases of colotomy the patient may have life made much more agreeable by the administration of salol, which will deodorize the fecal matter.

**RECENT RECIPES FOR GONORRHEA.**—Dr. William B. Dewees, of Salina, Kan., says (*Kan. Med. Jour.*) few cases will remain uncured after eight days' use of injection of

R.—Sodium bichlorat.

Resorcin . . .	aa ʒss.
Glycerin . . .	ʒiiss.
Rose Water, q. s.	ʒviiij.

M.—S. Inject ʒij every two hours the first day; then lengthen intervals as the discharge lessens. After third day, take internally, tincture cannabis indica, five drops every three hours. Bathe glans penis in as hot water as can be borne three times daily.

Dr. Richard Lee (*Intern. Surg. Jour.*, August, 1891) first uses warm injections of sodium bichlorat and morphia [sulph.] (in glycerin and rose water) for three days; and then *aristol* in liquid vaseline—twenty-five grains to ounce. Prompt relief, without relapse, was effected in from four to six days.—*Virginia Med. Monthly*.

**A LOTION FOR THE ALCPEDIA FOLLOWING ACUTE DISEASES.**—The following formula is given (*L'Union Médicale*) as a preventive of