

a sad, though usual example, of daily occurrence : Take a young fellow, like one among yourselves, who is simply run down temporarily in bodily vigor by too great sedentary occupation, combined with mental strain, and, perhaps, abuse of tobacco and coffee. He commences to be troubled with disagreeable, or even painful cardiac sensations. He cannot sleep comfortably at night, and after a half-dozen whiffs of a cigar, or a rapid walk of short duration, his heart seems suddenly to stop, or to beat forcibly and rapidly for a few moments, and then give intermittent and irregular shocks, which make him believe that all his internal machinery is out of gear. Under these circumstances he consults some experienced physician, who informs him solemnly that he has heart disease. What is —what can be the result—but gloomy forebodings, and a restless, irritable, feeling which forbids all steady, honest work, and makes him for months and years the victim of groundless fears? Better far that the examination had never been made, or the medical man consulted, for after a time, with improved hygienic surroundings, and more sleep and leisure, such cases might often come out all right. If not, abandonment for a time of tea, coffee, and tobacco, and the use of moderate doses of henbane, chloral, or aconite, with the local application of a belladonna plaster in the precordial region, will get the heart soon in good working order. During a painful attack of cardiac palpitations it may be advisable to give an opiate or an antispasmodic remedy. Tincture of lavender, aromatic spirits of ammonia, chloric ether, elixir of valerianate of ammonia, etc., are all good, and may be severally employed with advantage to the patient in relieving his distress. For several years past it has been my habit to combine the three first in equal quantities with an amount of syrup equal to the three in bulk. Of this mixture I give a teaspoonful in a little water every hour, until the painful feelings are notably relieved. Alcoholic stimulants are not debarred by this method of treatment, especially if the patient be weak and complain of fainting sensations.

There are numerous examples, however, in which the functional trouble accompanies a moderate degree of organic cardiac trouble, and so soon as the former is relieved, the latter remains innocuous with a little judicious care for a long series of years. The functional trouble may be dependent upon the condition of the blood, the stomach, or the gouty diathesis, or what is still tolerably frequent—a combination of different pathological conditions. Manifestly, in all such cases, while carminatives, small doses of digitalis, or the remedies already indicated, may be usefully employed to relieve occasional disturbance, paroxysmal in character, permanent relief can only be obtained by remedies directed against the causal agencies at work. If a plethoric state be present, use mild depletory measures, such as small, repeated doses of the neutral salts; if anæmia be the underlying difficulty, iron, generous diet, and life in the open

air, are mainly to be relied upon; for relief of dyspeptic trouble, regular meals, riding on horseback, and rationally formulated stomachics, varied according to prominent indications, should be persistently insisted upon; as for gout, potash and lithia salts are our sheet anchors, and soon an improvement of the cardiac condition will follow their exhibition. If the indications be complex, our formulæ should be made, so far as possible, to meet the requirements of the individual cases.—*N. Y. Medical Record.*

TETANUS: STUDY OF FOUR HUNDRED AND FIFTEEN CASES.

Dr. D. W. Yandell (*The Brain*) reports his study of four hundred and fifteen cases of tetanus. This study points to the following conclusions: (1) Traumatic tetanus is most fatal during the first decade of life. (2) It usually supervenes between four and nine days after the injury. (3) The largest number of recoveries are found in cases in which the disease occurred after the lapse of nine days from the injury. (4) Where tetanus continues fourteen days, recovery is the rule and death the exception, apparently independent of the treatment. (5) Tetanus arising during the puerperal state is the most fatal form of the disease. (6) Chloroform has, up to this time, yielded the largest percentage of cures in acute tetanus. (7) The true test of a remedy for tetanus is its influence on the history of disease. (a) Does it cure cases in which the disease occurred prior to the ninth day after the injury? (b) Does it fail in cases whose duration exceeds fourteen days? (8) Tried by these tests no agent has yet established its claims as a true remedy for tetanus.

SUBERINE IN EXCORIATED NIPPLES.

(*Lyon Medical.*)

The treatment advised by Dr. Brochard for sore and excoriated nipples is so simple that it deserves publicity:

"As soon as an excoriation or a crack, no matter how small, appears upon the breast of a nursing woman, the nipple and areola should be washed with *pure water*, and, after drying, powdered with *suberine*, or impalpable powder of cork. Suberine, which I always use for infants, is far preferable to lycopodium, which is an inert powder, because it contains tannin, and is exceedingly cheap, an important consideration with many mothers. After applying the powder, the nipple is covered with a piece of gold-beater's skin, cut star-shaped, and pierced in the centre with several holes made with a very fine needle.

"Whenever the child is to be put to the breast, the suberine should be washed off with water, and the gold-beater's skin placed over the nipple, thus allowing the babe to suck without causing pain to the nurse. After the infant has finished its meal, the nipple is again washed, powdered and covered."