## OPHTHALMIC APHORISMS.

Dr. J. J. Chisholm, of Baltimore, gives the following valuable aphorisms in a report presented to the Maryland State Medical Society at its last session:

1st.—Do not blister. In forty-nine applications out of fifty, as I find it used by physicians at large, it is an additional and useless torture to the eye disease from which the patient is already suffering.

2nd.—Do not use nitrate of silver. As constantly prescribed by general practitioners, it is not beneficial in one case out of one hundred, and therefore is a very painful infliction to the ninetynine who would have been so very much better off without it.

3rd.—Do not prescribe sugar of lead. In every case zinc, tannin or alum is better, and then there is no fear of having insoluble deposits incorporating themselves with the exposed surface of corneal ulcers.

4th.— Always use weak solutions of the mineral and vegetable astringents in the treatment of eye inflammations which attack the mucous surfaces, and restrict their application to conjunctival diseases exclusively. One grain of alum, sulphate or chloride of zinc, sulphate of copper or nitrate of silver, in an ounce of water, will in the majority of cases of conjunctival diseases, do much more good and give much less uneasiness than the very painful five and ten grain solutions which are so often injuriously prescribed by physicians.

5th.—Solution of the sulphate of atropia, from one to four grains to the ounce of rose water, is an essential eye-drop in the treatment of acute iritis, to break up newly formed adhesions. One drop of the atropia solution in an inflamed eye is a most valuable means of establishing the diagnosis whether iritic complications exist or not, and should be used in most cases of eye inflammation to find out whether there are any adhesions of the pupil to the lens.

6th.—Eserine in solution of one grain to the ounce of water is the remedy for purely corneal lesions.

7th. When physicians are in doubt as to the character of an eye disease, they should seek a consultation from specialists who are more familiar with eye diseases than general practitioners can possibly be. Such timely aid often saves the patient a lifetime of trouble.

If physicians would commit to memory and keep at their finger ends, and ready for use, these simple aphorisms, the amount of mental and bodily suffering which they will prevent in their eye patients is beyond calculation. While all good rules have necessarily many exceptions, they may safely follow their simple guidance.—Ohio Medical Journal.

## THE CANADA MEDICAL RECORD,

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MONTRFAL, MAY, 1883.

## THE NEW ANATOMICAL ACT.

The Lieut-Governor of the Province of Quebec, under date of May 19, has issued his proclamation, stating that for the purposes of the New Anatomical Act the Province shall be divided into the Quebec section and the Montreal section The former comprises the judicial districts of Arthabaska, Beauce, Chicoutimi, Gaspé, Kamouraska, Montmagny, Quebec, Rimouski, Saguenay and Three Rivers. The Montreal section includes Beauharnois, Bedford, Iberville, Joliette, Montreal, Ottawa, Richelieu, St. Francis, St. Hyacinthe and Terrebonne.

## THE MONTREAL GENERAL HOSPITAL.

On the 17th of this month the annual meeting of the Life Governors of this Hospital was held in the Governors Hall. As the election to fill the vacancy created by Dr. Wright's resignation took place at this meeting the attendance was very large, in fact the largest ever known. The candidates were Dr. Shepherd and Dr. F. W. Campbell, and on the final ballot Dr. Shepherd had a majority of 12 votes, viz., 75 votes, and Dr. Campbell 63 votes. Personally interested in the contest we would that we felt our task was completed by a bare statement of the result. But it is not, and we feel compelled to say that a large amount of dissatisfaction exists among the Governors at the manner in which the election was conducted. There is a very general belief that the meeting was opened at least five minutes before the time named, instead of allowing the