

in connection with the temperature is of great assistance.

"11. When the temperature and general symptoms agree, but the pulse disagrees, the two former are to be relied on.

"12. When the pulse and general symptoms agree in indicating unfavorably, the temperature cannot be relied on, if contradictory, unless the improvement in respect to temperature is marked and persistent.

"13. When pulse and general symptoms agree in a favorable indication, a high or rising temperature should arrest attention.

"14. All other means of investigation should be used in connection with the temperature to obtain the greatest benefit from the latter.

"15. The continuous daily record of the three vital signs here represented, in the way exhibited, affords much aid in the diagnosis, prognosis, and treatment of disease, by the presentation to the eye of its history in these respects.

"16. The systematic record of these three points may assist in determining, at some future day, the vexed question whether the type of disease is changing, by preserving pictures which can be easily compared."—*Medical Record, New York.*

BROMIDE OF POTASSIUM IN EPILEPSY—A CONTRAST DURING A FRENCH CAMPAIGN.

THE distinguished psychologist, M. Legrand Du Saulle, of the Bicêtre, in a communication to the *Gazette des Hôpitaux* of February 20 and 23, furnishes an interesting review of the results of his employment of the bromide of potassium in 207 cases of epilepsy.

The bromide, he says, does not produce any mischievous effects; provided that it is of irreproachable chemical purity, and that its operation be attentively watched by the Practitioner—say, every fortnight. He has patients who have been taking from one to two drachms daily for a very long period without any ill-effect upon their health. Frontal cephalalgia, stuffing of the nares, lacrymation, gastric irritation, loss of strength, torpor of movement, acne, partial abolition of general sensibility, indifference, apathy, somnolence, intellectual obtuseness, stupor, inordinate appetite, constipation, and especially emaciation, have been justly indicated as consequences of its employment; but such effects have only been produced when the bromide has been of doubtful quality or has been ill-administered. If we place ourselves under favourable conditions for carrying on the experiment, we are not long in finding out that it may become as the daily bread of the patient, and so far from inducing emaciation, it rather favours the gain of flesh. It must, however, be well borne in mind that when, even with the purest salts, the daily dose of one drachm is approached, the reflex sensibility of the pharynx, base of the tongue, and epiglottis is considerably diminished or abolished, and that the genital desire is sensibly blunted. It is at about the same dose that acne commences, and it is an error to suppose that its intensity should influence the prognosis.

If the dose be too large at first, or too rapidly increased, bromism may be easily induced. M. Legrand commences with from twenty to thirty grains a day, and, according to the nature of the case, increases this by from seven to fifteen grains every fortnight or month—"mounting only slowly the steps of the therapeutical ladder." The ultimate daily quantity which he reaches oscillates between ninety and 135 grains, but to attain this from three to six months are required. In one case only was a maximum of 210 grains reached, but for this twenty-six months of treatment were required. While at least from sixty to seventy-five grains daily will be required for males before any efficacious therapeutical effect will have been attained, in young girls and women well-marked and sufficient action may be obtained by from forty-five to sixty-five grains.

In 207 cases in which he has used the bromide, the following results were obtained:—In seventeen, absolute suspension of all epileptic symptoms during from two to four years; in twenty-eight, absolute suspension from twelve to twenty-two months; in thirty-three, considerable amelioration, no epileptic attack having occurred from six to ten months; in nineteen, a relative amelioration, the remission lasting from two to six months, and the various symptoms being much abated in severity; in 110, failure. This last item is rendered larger by the inclusion of patients that have been too short a time under observation to speak positively about; others who have been lost sight of during recent events, and others, again, for whom the medicine proved too dear to secure their perseverance with it. The proportion of cures is sensibly greater in private practice than in the Bicêtre or Salpêtrière, most of these last presenting cerebral complications. In the unsuccessful cases, also, the bromide often abates much of the violence of the symptoms.

When an epileptic has passed a year without an attack, M. Legrand administers the bromide only on alternate days during the first half of the month, and every day during the second half; and, after eighteen months' suspension of attacks, he gives it every third day during the first, and every day during the second half of the month. At the end of the second year it is given every fourth day during the first fortnight, and so on. He considers a rigid perseverance in this plan essential, and believes the usual plan of administering decreasing doses as improvement occurs a deplorable error. Relapse is sure to occur if any truce be thus given to this obstinate disease, the bromide being, as already said, as it were, the daily bread of the epileptic. Medical superintendence during its employment is always essential; and surreptitious augmentation of the dose, as sometimes practised by patients, may lead to aggravated symptoms. The acne which accompanies the use of the medicine is often very obstinate, and ignorance of its bromic nature has led the useless employment of various agents. Great fetidity of breath attends the prolonged use of the bromide, and this is best met by taking it only a minute or two before meal, or receiving it as an enema twenty minutes before.