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CANADA LANCET.

WILLIAM EDWARD BOWMAN, M.D., EDITOR.

WHOLE No., 13.

MONTREAL, MARCH 15, 1864.

SECOND YEAR.

THE TINCTURES OF THE NEW BRITISH PHARMACOPOEIA.

ABBREVIATIONS.—The old pharmacopœias will be designated by the letters; L. for that of London; E. for that of Edinburgh; and D. for that of Dublin.

Avoirdupois weights adapted.—32½ grains = 1 oz. 16 oz. = 1 lb.

Imperial measures employed.—60 minims = 1 drachm. 8 drachms = 1 ounce. 20 fl. oz. = 1 pint. 3 pints = 1 gall. m.

An Avoirdupois ounce weighs 42½ grains less than a Troy ounce.

An Imperial pint of 20 oz. measures 19 oz. 1 dr. 3½ m. of Wine measure.

We stated last month that the fluid ounce of the Imperial pint was smaller by 19 minims than the ounce of the old wine pint. And as the latter is the ounce indicated by the graduated measures purchased in the United States, and in general use in many parts of Canada, it must be borne in mind that less than 19½ of them are equal to the 20 small ounces directed in the following formulæ, and forming the Imperial pint. This is a matter of some moment when preparing laudanum or other strong tinctures.

The change in weights will be rather a convenience than otherwise to the generality of medical men; for when compelled to prepare any remedy for themselves, they can readily procure the proper weights at any retail shop in the country.

In their preface, the compilers state that, with few exceptions, the tinctures made with dangerous ingredients have been brought to one standard of strength, so that an ordinary dose would be from 15 to 25 minims, while the remainder have been left as formerly, to be given in doses of from one to two drachms.

We will, for the sake of comparison, reduce the Troy weights of the former recipes of the three British Colleges to Avoirdupois, to show the differences between the old and the new formulæ.

Tinctura Aconiti.—Pulv. aconite root, 2½ oz.; alcohol, 20 fl. oz. (Dose of this tincture 15 to 25 minims, to be carefully increased.) The L. was nearly 8 oz. av. of the root to 20 fl. oz.; and the D. was 10 oz., also of the root, to 20 fl. oz. Fleming's tincture of aconite is 15 oz. av. to 20 fl. oz. of alcohol. (Dose of Fleming's tinct. 3 to 5 drops three times a day, to be cautiously increased.)

Tr. Aloes.—Socotrine aloes ½ oz.; ext. licorice 1½ oz.; proof spirit 20 fl. oz. (Dose from half an ounce to an ounce and a half.) This is the old unchanged tincture of the three colleges.

Tr. Aloes et Myrrha.—This, one of the most valuable of our tinctures, has not been allowed a place in the new pharmacopœia.

Tr. Ammonæ Co.—This preparation has been wisely rejected.

Tr. Arnica.—Pulv. arnica root 1 oz.; alcohol 20 fl. oz. This tincture is now for the first time introduced. It is intended for external use.

Tr. Assafœtida.—Assafœtida 2½ oz.; alcohol 20 fl. oz. (A medium dose is one drachm.) This does

not materially differ from the former three pharmacopœias.

Tr. Aurantii.—Bitter-orange peel 2 oz.; proof spirit 20 fl. oz. This is similar to the old formulæ.

Tr. Belladonnæ.—Powdered leaves 1 oz.; proof spirit 20 fl. oz. (Dose 20 to 40 m. to be gradually increased.) The L. was 2 oz. and 85 grs. to the 20 fl. oz., and the D. 2½ oz. to the same quantity.

Tr. Benzoini Co.—Benzoin 2 oz.; storax 1½ oz.; tolu ½ oz.; Soc. aloes 160 grs.; alcohol 20 fl. oz. (Dose from half to two drachms.) This does not vary much from the old receipts.

Tr. Bucco.—Buchu leaves 2½ oz.; proof spirit 20 fl. oz. (Dose from 1 to three drachms.) This also remains unchanged.

Tr. Calumbæ.—Calumbo 2½ oz.; proof spirit 20 fl. oz. (Dose from one to two drachms.) This was the D. formula, the L. and E. being but 1½ oz. and 64 grs. to the 20 fl. oz.

Tr. Camphoræ cum Opio.—Powdered opium 40 grs.; benzoic acid 40 grs.; camphor 30 grs.; oil of anise 30 m.; proof spirit 20 fl. oz. With the exception of a slight increase in the camphor, this is the old formula over again. It would have been much improved by the addition of a little honey and cochineal; had infants a voice in the matter, they would certainly second the recommendation. (Half an ounce contains a grain of opium.)

Tr. Cannabis Indicæ.—Extract of Indian hemp 1 oz.; alcohol 20 fl. oz. (Dose from 15 to 25 minims.) This is the unchanged Dublin recipe.

Tr. Cantharidis.—Powdered flies ½ oz. (109½ grs.); proof spirit 20 fl. oz. (Dose from 20 to 40 m. in mucilage or luscid tea.) This was the D. formula; the L. and E. contained 10½ grs. more in the 20 oz.

Tr. Capsici.—Cayenne pepper ½ oz. (328½ grs.); alcohol 20 fl. oz. (Dose one to two drachms.) The L. and E. were 28 grs. less in the 20 oz., but the D. contained 1½ oz. av. to the 20 fl. oz.

Tr. Cardamomi.—This has not been admitted; it was an E. tincture.

Tr. Cardamomi Co.—Cardamoms ½ oz.; caraway ½ oz.; raisins, freed from seeds 2 oz.; cinnamon ½ oz.; cochineal 60 grs.; proof spirit 20 fl. oz. (Dose one to two drachms.) This was the D. receipt with the addition of raisins, and is a half stronger than that of the L. or E.

Tr. Cascarillæ.—Cascarilla 2½ oz.; proof spirit 20 fl. oz. (Dose from one to two drachms.) This was the D.; the L. and E. were 2½ oz. av. to 20 fl. oz.

Tr. Cassia.—This E. tincture has been omitted.

Tr. Castorei.—Castor 1 oz.; alcohol 20 fl. oz. (Dose from one to two drachms or more.) The L. and E. were 1½ oz. and 53 grs. av. to the 20 fl. oz.

Tr. Castorei Am.—This has been rejected.

Tr. Catechu.—Catechu 2½ oz.; cinnamon 1 oz.; proof spirit 20 fl. oz. (Dose from one to two drs.) The L. and E. had 1½ oz. and 74 grs. av. of catechu to the 20 oz., and the D. 2 oz. to the 20 oz.

Tr. Chirata.—Chiretta 2½ oz.; proof spirit 20 fl. oz. (Dose one to two drachms.) This is a tincture from the D. and remains unchanged.

Tr. Cinchona.—Yellow bark 4 oz.; proof spirit 20 fl. oz. (Dose one to three drachms.) The L. and E. were 4½ oz. and 60 grs. av. to the 20 fl. oz.

Tr. Cinchona Composita.—Pale bark 2 oz.; bitter-orange peel 1 oz.; serpentary ¼ oz.; saffron 60 grs.; cochineal 30 grs.; proof spirit 20 fl. oz. (Dose one to three drachms.) The L. and E. put in 85 grs. more of the bark to the 20 oz.; otherwise this recipe differs but slightly from that of the three colleges.

Tr. Cinnamomi.—Cinnamon 2½ oz.; proof spirit 20 fl. oz. (Dose one to three drachms.) The L. and E. were scarcely 2 oz. to the 20 oz.

Tr. Cinnamomi Co.—This, although it occupied a place in the three pharmacopœias, has not been deemed worthy of a place in the new one.

Tr. Cocci.—Pulv. Cochineal 2½ oz.; proof spirit 20 fl. oz. (Dose from one to three drachms.) The D. was 2 oz. to 30. Used chiefly for colouring mixtures.

Tr. Colchici Semina.—Bruised colchicum seed 2½ oz.; proof spirit 20 fl. oz. (Dose from one to two drachms.) This was the D. formula, the L. and E. were 2½ oz. av. to 20 fl. oz.

Tr. Colchici Comp.—This has been omitted by the Council.

Tr. Conii Fructus.—Dried ripe hemlock fruit, bruised, 2½ oz.; proof spirit 20 fl. oz. (Dose from 15 to 30 m.) The fruit of the conium has been selected as being more certain in its strength than the dried leaves; the tincture of the latter has therefore been left out of the new work.

Tr. Croci.—Saffron 1 oz.; proof spirit 20 fl. oz. (Dose from one to three drachms.) This is the D. formula; the E. had 42½ grs. more in the 20 oz. Used as a colouring for mixtures.

Tr. Cubeba.—This has not been given a place, on account of the alcohol necessary for its preparation. We regret it, as the L. preparation was an excellent one, and must still continue to be employed.

Tr. Cuparia.—Was discarded as unnecessary.

Tr. Digitalis.—Foxglove leaves 2½ oz.; proof spirit 20 fl. oz. (Dose from 15 to 30 or 40 m, cautiously increased. In delirium tremens half an ounce.) This is the D. formula, the L. and E. being but 2 oz. 85 grs. av. (134 grs. less) to the 20 fl. oz.

Tr. Ergote.—Bruised ergot 5 oz.; proof spirit 20 fl. oz. (Dose from one to two drachms.) The D. was 4 oz. to 20.

Tr. Ergota Eth.—Of the L. P., was not adopted.

Tr. Ferri Perchloridi.—Iron wire 1 oz.; hydrochloric acid 5 fl. oz.; nitric acid 3 drachms; water 3½ oz.; alcohol 15 fl. oz. Dilute the muriatic acid with 2½ oz. of the water, add the wire and dissolve with a gentle heat in a glass or enamelled vessel. Next mix the nitric acid and the remaining ounce of water, then pour them into the solution of iron, and evaporate to 5 fl. ounces; when cold add the alcohol. (Dose 10 to 30 m. gradually increased to a drachm or more.)

The D. was prepared in a similar manner but contained 3½ oz. av. of wire in 20 fl. oz. and was consequently 3½ times as strong. The other colleges directed the oxide of iron to be dissolved in the hydrochloric acid; the product was of the same strength as that of the new pharmacopœia, (viz., of the sp. gr. 0.992).

Tr. Galla.—Bruised galls. 2½ oz.; proof spirit 20 fl. oz. (Dose from half to two drachms.) This is the D. receipt, the L. and E. were 2½ oz. av. to 20 fl. oz.

Tr. Gentiane Co.—Gentian 1½ oz.; bitter-orange peel ½ oz.; cardamoms ¼ oz.; proof spirit 20 fl. oz. (Dose from half to two drachms.) This is the D. receipt, the L. and E. contained 5½ grs. less of gentian in the 20 oz.

Tr. Guaiaci.—This tincture has been omitted.

Tr. Guaiaci Ammoniata.—Guaiac resin 4 oz.; aromatic spits. ammonia 20 fl. oz. (Dose one to two drachms in linseed tea or gruel.) The L. and E. were 3½ oz. and 40 grs. av. to 20 fl. oz.

Tr. Hellebori.—The tincture of black hellebore has not been thought worthy of a place in the new pharmacopœia.

Tr. Hyoscyami.—Dried henbane leaves 2½ oz.; proof spirit 20 fl. oz. (Dose one fluid drachm.) This is the D. recipe, the L. and E. being nearly 2½ oz. to the 20 fl. oz.

Tr. Iodi.—Iodine ¼ oz.; iodide of potassium ¼ oz.; alcohol 20 fl. oz. (Dose 15 to 30 m. to be gradually increased.) This tincture is scarcely strong enough for external application for which another preparation is given under the name of Linimentum Iodi. Of this former tincture the L. was iodine ¼ oz. and 21 grs.; and iodide of potassium 1 oz. and 4½ grs. to 20 fl. oz. The E. was iodine 1½ oz. and 53 grs. av. to 20 fl. oz. alcohol. The D. was iodine ¼ oz.; iodide of potassium 1 oz.; alcohol 20 fl. oz.

Tr. Jalape.—Jalap 2½ oz.; proof spirit 20 fl. oz. (Dose from one to three drachms.) This is the D. recipe. The L. was 2½ oz. to 20 fl. oz. The E. was 3½ oz. and 39 grs. to 20 fl. oz.

Tr. Kino.—Kino 2 oz.; alcohol 20 fl. oz. (Dose from one to two drachms.) The L. and E. had 3½ grains less in the 20 fl. oz.

Tr. Krameria.—Rhatany 2½ oz.; proof spirit 20 fl. oz. (Dose from one to two drachms.) The D. was 4 oz. to 20 fl. oz.

Tr. Lavandula Co.—Oil of lavender 45 m.; oil of rosemary 5 m.; cinnamon bruised 75 grs.; nutmegs 75 grs.; red saunders 150 grs.; alcohol 20 fl. oz. (Dose 30 drops to a drachm, in water or in sugar.) This is a copy of the L. formula, the D. was made from the distilled spirits but did not vary greatly in strength. The D. was about twice as strong as the above.

Tr. Limonis.—Fresh lemon peel 2½ oz.; proof spirit 20 fl. oz. (Dose one or two drachms.) The L. was scarcely 2 oz. av., whilst the D. put 5 oz. to the 20 fl. oz.

Tr. Lobelia.—Lobelia herb 2½ oz.; proof spirit 20 fl. oz. (Dose one or two drachms; emetic dose ½ oz.) This was the D. recipe, the L. and E. were very nearly 2½ oz. to the 20 oz. proof spirit.

Tr. Lobelia Ethera.—Lobelia herb dried 2½ oz.; sulphuric ether 6½ fl. oz.; alcohol 13½ fl. oz. (Dose one or two drachms.) The L. and E. contained nearly ¼ oz. more of the herb to the 20 oz.

Tr. Lupuli.—Hops 2½ oz.; proof spirit 20 fl. oz. (Dose one to two drachms in syrup.) The L. was a little over 3½ oz., hops to 20 fl. oz. The E. and D. employed the yellow powder (lupulin) sifted out of the hops, of which the E. directed 2½ oz. and the D. 2½ oz. to the Imperial pint of proof spirit. The hops themselves make an uncertain tincture. It is to be regretted that the compilers were not aware of this fact.

Tr. Matico.—This has not found a place in the new work.

Tr. Myrrha.—Myrrh 2½ oz.; alcohol 20 fl. oz. (Dose 20 to 30 m.) The L. was 1½ oz. and 64 grs. to the 2½ oz. The E. 1½ oz. and 74 grs. to the 20 oz. And the D. 2 oz. to the 20 fl. oz. alcohol.

Tr. Nux Vomica.—Nux vomica 2 oz.; alcohol 20 fl. oz. Soften the nuts thoroughly by steaming, dry quickly, and pound to powder. (Dose of the tincture from half a drachm to a drachm or more.)

Tr. Opii.—Pulv. opium 1½ oz.; proof spirit 20 fl. oz. (15 m., or 25 drops, contain 1 gr. of opium.) This was the D. formula; the L. directed 63j grs. more to the 20 fl. oz.; whilst the E. ordered 1½ oz. and 63j grs. sliced opium, which not having been dried made it about equal to the present tincture.

Tr. Opii Ammonia; *Tr. Quassia;* and *Tr. Quassia Co.*—Have all been omitted from the new work.

Tr. Quinine Co.—Sulphate of quinine 100 grs.; tincture of orange peel 20 fl. oz. (Dose ʒj., containing 1 gr. of quinine.) This is the L. recipe unaltered.

Tr. Rhei.—Rhubarb 2 oz.; cardamoms ½ oz.; coriander ½ oz.; saffron ½ oz.; proof spirit 20 fl. oz. (Dose a half to one oz.) The L. was 1½ oz. and 53 grs.; the E. 1½ oz. and 74 grs.; and the D. but 1½ oz. to the 20 fl. oz.

Tr. Rhei Aloes; and *Tr. Rhei Gentiane.*—Have been omitted.

Tr. Sabine.—Dried savine leaves 2½ oz.; proof spirit 20 fl. oz. (Dose from one to two drachms.) This is a new addition to the tinctures.

Tr. Scilla.—Squills 2½ oz.; proof spirit 20 fl. oz. (Dose from ten to twenty minims.) This was the D. recipe; the L. and E. contained nearly ½ oz. more of the squills in the 20 oz.

Tr. Senega.—Bruised senega 2½ oz.; proof spirit 20 fl. oz. (Dose one to two drachms.) This is a new and valuable tincture in cases of pneumonia, &c.

Tr. Senna.—Senna 2½ oz.; raisins freed from seeds 2 oz.; caraway ½ oz.; coriander ½ oz.; proof spirit 20 fl. oz. (Dose from two to four drachms or more.) This is somewhat stronger than the compound tincture of the old pharmacopœias.

Tr. Serpentaria.—Serpentaria 2½ oz.; proof spirit 20 fl. oz. (Dose from one to two drachms.) The L. and E. were not quite 2 oz. to the 20 oz.

Tr. Stramonii.—Stramonium seed 2½ oz.; proof spirit 20 fl. oz. (Dose from fifteen to twenty-five m.) This is the D. formula unchanged.

Tr. Tolutana.—Tolu 2½ oz.; alcohol 20 fl. oz. (Dose from fifteen to thirty m.)—The L. was 1 oz. and 44 grs. to 20; E. 1½ oz. and 74 grs. to 20; and the D. 2 oz. to the 20 fl. oz. alcohol.

Tr. Valeriana.—Valerian 2½ oz.; proof spirit 20 fl. oz. (Dose from one to three drachms.) This is the D. recipe; the L. and E. were nearly 2½ oz. to the 20 fl. oz.

Tr. Valeriana Ammonia.—Valerian 2½ oz.; som. spts. ammonia 20 fl. oz. (Dose from one to two drachms, in syrup, milk, or mucilage.) The L. and E. were 2½ oz. to the 20 fl. oz.

Tr. Zingiberis.—Ginger 2½ oz.; alcohol 20 fl. oz. (Dose from a half to 1 drachm or more.) The L. and E. were 1½ oz. and 53 grs. to 20 oz.; and the D. 4 oz. and 60 grs. to the 20 fl. oz. alcohol.

Interesting Cases.

HEMORRHAGE FROM THE RECTUM—SYM'S TREATMENT.—On the 13th December last, I was called a distance of 10 miles to see a respectable English woman, aged 49, the mother of a large family, the

youngest six years old, on account of "passing blood" from her bowels. She had been bleeding for two or three days, and was now quite weak and not able to sit up; had been troubled with piles a year or so previously, and supposed this to be from the same cause: the blood always came at the time of, and immediately after an evacuation of the rectum; no sickness of the stomach; or fever; the pulse quick and weak. I made a digital examination of the rectum, but did not find any hemorrhoids; examined the uterus and vagina, thinking the blood might come from there, but found nothing wrong. I should have stated the blood appeared quite fresh, as if it came from a wound. The woman was of a relaxed habit of body, so I concluded the hemorrhage resulted from a relaxed and weakened condition of the mucous membrane of the bowels. I prescribed alum and sulphuric acid three times a day; pulv. ipec. comp. at night; also tinct. ferri mur., &c. She seemed to be somewhat benefited by this, but still passed some blood at nearly every stool.

On the 30th of the same month, I was again called to her; had been bleeding more profusely than ever. I was convinced I had not struck the cause, and determined upon a more rigid examination. Examined the rectum and vagina as before, found every thing right, then the anus by the eye, and at the verge of the latter discovered three small projections of mucous membrane or skin the longest about half an inch when stretched, and the same in width, the other two were quite small; in fact, they were all so small I did not and could not have detected them by the finger alone. Remembering some cases reported in the *Canada Lancet* of such folds causing hemorrhage and the successful treatment of Dr. Syme, I pouched upon them as the offenders. I removed the largest by the scissors, and applied the argentic nitr. freely to them all. The next day, had an operation of the bowels without any blood; directed some of the lunar caustic to be applied if necessary, and to give me word in a few days. Hearing no more of my patient, supposed I had again failed, and that she had gone to another disciple of Esculapius.

Two months afterwards, being in her neighbourhood, I met her looking hale and hearty, and on being dubiously asked if she had been much troubled with the bleeding after my last visit, replied she had not seen another drop of blood.

For this unequivocal case of cure I have to thank your useful little journal. Yours truly,

Geo. D. Spooner, M.D.

Clarke, C. W., Feb. 29th, 1864

CURIOUS EFFECT OF SANTONIN.—On the 7th inst., J. G., a child of five years of age, having symptoms of worms, received four grains of santonin at bed-time, which seemed to have the effect of making him restless throughout the night, but particularly towards day-light. At seven in the morning another powder of four grains was given him, and an hour and a half afterwards he was seized with a fit, foaming slightly at the mouth. It was not severe, but having lasted for half an hour it greatly alarmed the parents, who were intelligent persons, and who administered frequent draughts of lukewarm water until vomiting was produced, which immediately caused the subsidence of all the symptoms. The child was very drowsy afterwards; his urine did not become of a deep yellow until evening (18 hours from the first dose). The next day

he was quite well. I am indebted solely to the parents for these particulars, as no medical man was present during the attack. The directions for the powders had been one every 12 hours, to be followed by castor oil.

W. E. B.

OPERATION FOR COMPLETE STAPHYLOMA, FOLLOWED BY THE APPLICATION OF AN ARTIFICIAL EYE OF ENAMEL.—By G. S. De Bonati, M.D., of Berthier: *Membr. de la Société Impériale des Sciences, Arts et Belles Lettres de France, &c.*

We have received an excellent report of this operation, but unfortunately our limited space will not permit its insertion in full. It was performed in the usual manner by passing a thread through the protruding portion of the ball, which allowed of the escape of a portion of the fluid and served to steady the eye, and removing the staphyloma, posterior to the ligature, by means of a Demarre's staphylotome, an instrument with two cutting edges, similar in shape to an ordinary cataract knife. The lens did not escape, nor was there any hemorrhage, or other bad symptom; and iced compresses readily subdued the subsequent inflammation. After the third day, the portion of the eye, between the lips of the wound, presented numerous little white spots, which seemed more abundant in the centre, these rapidly extended so as to cover the whole surface which separated the incision. The cicatrix which formed had to be punctured on the fifth day after the operation, to allow of the escape of the newly secreted aqueous fluid; and this it was found necessary to repeat every second day for upwards of three weeks, by which precaution the ball was kept sufficiently reduced in size to admit of the artificial shell, which was applied on the tenth week after the operation, which proved satisfactory in the extreme from the beginning.

Canada Lancet.

MONTREAL, MARCH 15, 1864.

To those who have responded to our appeal, and sent us cheering letters and remittances, we return thanks. The Lancet will be continued another year without increase of size. And as heretofore will be largely circulated abroad, that this country may not go unrepresented in the general advancement of medical science throughout the world. We would therefore have it understood, that all copies received by the profession in other lands must be considered as sent without desire for aught but the reading of them, and kind wishes for Canada and its little periodical.

Review.

A PRACTICAL TREATISE UPON ECZEMA, INCLUDING ITS LICHENOUS, IMPETIGENOUS, AND PRURIGINOUS VARIETIES. By T. McCall Anderson, M.D., Fellow of the Faculty of Physicians and Surgeons; Physician to the Dispensary for Skin Diseases, Glasgow, &c. 8vo. pp. 144. Churchill & Sons.

The intention of this volume is to furnish the profession with a thorough guide for the manage-

ment of one of the most common and distressing affections which the practitioner is called upon to treat. Its author, a former pupil of the celebrated Hebra, speaks to us after an extended experience and much close observation, recommends himself to us as a thoroughly practical man, promises us in advance to make no statements that he has not verified, to bring forward no treatment that he has not thoroughly tested: let us then listen to him—give him on this praiseworthy agreement our valuable columns, we all want something useful—anything indeed to make us better doctors.

He begins at the very outset by startling his readers with the affirmation that vesicles are by no means essential to the eruption of eczema, but that the principal elementary lesion (meaning we suppose the initiative or first symptoms) may be either an erythema, a vesicle, a pustule, a pimple, or merely a chapped skin; and that during its course there are often a mixture of several of these in a single spot of eczema.

He says that these views are not his alone, that they are those entertained by many of the most celebrated French and German dermatologists, and states that Hebra of Vienna was the first to put forth this correct elucidation of seemingly contradictory symptoms—to do away with the difficulties in the diagnosis of eczema.

The first few chapters are so excellent, so practical, and settle, in our opinion, so satisfactorily the true nature of eczema, that we draw liberally from them; they are too good to be omitted.

He affirms that any one who studies this disease carefully can scarcely help arriving at similar conclusions concerning it as himself; and says that impetigo, lichen, and prurigo, are but varieties of eczema in which the foundation is either a crop of pustules or pimples.

That the symptoms of an eczematous eruption, when at its height, are infiltration of the skin, exudation on its surface, formation of crusts, and itching.

That the infiltration is due to the transudation of serum within the skin, and that upon its presence depend all the other symptoms enumerated; that the greater the infiltration the more inveterate is the affection. That it has a doughy feel, and as pressure the redness gives way for a moment to a yellowish colour; quite unlike the healthy white left on pressing a spot of simple erythema.

That the moisture, or exudation, on the surface of the skin, may take place constantly, or merely when the circulation is excited, or the part exposed to friction. The observer must not therefore be led astray by the absence of this characteristic symptom at the time of examination, but must inquire whether the eruption has ever been moist. That exudation has the property of staining and stiffening the underclothing; they may therefore be looked at if there be any doubts on the subject.

A solution of potash (10 grs. potassæ fusa to 10 oz. of water) applied to an eczematous surface, produces a copious exudation of this fluid externally, which seems to lessen the infiltration beneath.

The exudation is often purulent in character; and if the nails of the sufferer be too vigorously employed may be mixed with blood.

The crusts are the dried exudation and exfoliated epidermis, mingled frequently with sebaceous matter (especially when on the head), and if uncleanly with particles of dirt. But when these scabs are kept removed by poultices, the exudation dries but

thin scales, and even these may be entirely wanting. If negligent, the crusts by constant additions to their under surface, become very thick and adherent, and not unfrequently remain attached to the skin after the eczema is quite cured. When the exudation is serous, the crusts are grayish or brownish, if purulent they are yellow; and blood may render either, brown or black.

The itching may be constant or intermittent. It is always aggravated by touching the inflamed part, and becomes troublesome by the use of stimulating food or drink, or on getting warm in bed. Sometimes instead of itching, a feeling that insects are crawling over the skin is experienced, and is often very distressing to the patient. At others a burning heat is complained of, and this is more apt to occur when the patch is acutely inflamed, or when there is a copious eruption of newly formed vesicles or pustules. This latter sensation indicates the employment of emollient applications in the first instance.

Scratching always aggravates the disease, and tends to bring out a fresh crop of eruption. In mild cases indeed, the disease may be kept up by the scratching alone; and may be cured by such local sedatives as stop the itching.

When the elementary lesion is erythema, the redness, although similar to simple erythema at first, is soon accompanied by exfoliation of the epidermis; after which, infiltration of the skin gradually supervenes; we then have patches of reddened, scaly, and infiltrated skin (eczema squamosum). Next follows a serous exudation on its surface, and this serum concretes into crusts; we then have an exuding, infiltrated, and itchy eczematous eruption covered with crusts, and perhaps without the appearance of a single vesicle (eczema erythematodes). The eruption is now at its height, but after a while the infiltration begins to yield, and the disease progresses towards a cure; and as the symptoms disappear, simple erythema is left as at the commencement.

Sometimes, without commencing with erythema, eczema takes on this form, the skin becoming red, smooth, and shining, whilst the deeper structures are loaded with infiltration, and every now and then the cuticle exfoliates; this occurs most frequently on the legs, the scrotum, and the ears. If scratched now, and it is usually very itchy, excoriations occur, serum exudes, and often blood and crusts are formed.

The vesicular form of eczema usually commences with an erythematous eruption, and upon this ground vesicles are developed, many of which may become converted into pustules. The vesicles are small, and closely set together, and usually rupture early, the serosity concreting into crusts. It is a very common occurrence for many of them to run together. The vesicular stage may be kept up by the formation of successive crops of vesicles, but they usually disappear after the infiltration of the skin becomes pronounced, and the disease thoroughly established. When the vesicular stage is over, the infiltrated patches are red and inflamed, and studded over with innumerable points of a deeper red, which cause it to present a remarkable punctated appearance, an appearance which serves to distinguish eczema from all other diseases of the skin. The remedial application of a solution of carbonate of potash will be found to bring out these red points when not well marked. Being situated over the orifices of the cutaneous follicles,

the vesicles receive the serum which does not form into scabs until liberated by their rupture.

The pustules of eczema, like the vesicles, usually arise from an erythematous surface, where they may at once be developed, or be but secondary, from vesicles becoming filled with pus. The pustules often become larger than vesicles, and remain longer before breaking; otherwise the pustular form runs exactly the same course as the vesicular; being followed by the same punctated, exuding, itchy, and infiltrated patches. Pustular eczema is the so called impetigo of authors; it occurs oftenest on hairy parts, where it involves the orifices of the hair follicles.

Papular eczema, described by authors as lichen, is another variety. The eruption commences with small red pimples which may be scattered (prurigo), or confluent, forming rough and furrowed patches. Like the other species it runs through the regular changes of itching, infiltration of the skin, exudation of serum, formation of crusts, &c. Vesicles and pustules are frequently developed through the course of the disease.

When the inflammatory stage becomes arrested before that of exudation sets in, the pimples remain dry throughout their whole course, whence the error in attributing them to a separate disease. Vesicular eczema occasionally dries up and disappears in a similar manner, but the papular form is the one most likely to be thus arrested.

Fissures of the skin not unfrequently form the commencement of eczema; they usually appear upon an erythematous ground. While any part of the skin, as the folds at the anus, the angles of the mouth, or the joints may be attacked, the most typical cases are to be met with on the hands. These cracks give excruciating pain on movement; infiltration occurs; serum exudes; and crusts are formed just as in other varieties; but the pain generally predominates over the itching. Common chapped hands, when neglected, gradually become eczematous, and exhibit all the above symptoms.

Passing over much interesting and useful information, we arrive at the third chapter, where we notice the following:—

Even scratching the healthy skin is quite capable of producing an eczematous eruption.

Ulcers are often met with in cases of eczema, although they are usually small and superficial, and occur most frequently on the legs, and are associated with varicose veins; yet they may become very large and deep, and assume any appearance from the inflamed to the indolent.

In speaking of the ætiology of eczema, he classifies, among the predisposing causes, the lymphatic temperament, scrofulous and debilitated states of the system and hereditary tendency. The exciting one being usually some external or internal irritant, improper or insufficient food, &c. The disease occasionally, however, attacks the healthiest persons without any obvious reason. Some occupations are particularly liable to it, as those of cooks, grocers, bakers, smiths, bricklayers, &c. Among other irritants, he mentions the heat of the sun, the use of a blunt razor to the face, teething, disordered stomach and bowels, worms, piles, stricture, &c.

Our author considers it quite possible to acquire eczema by contagion, for he has known of patients affected seemingly by sleeping with those who were labouring under the disease.

Concerning the diagnosis, he says, eczema may

be readily distinguished from simple erythema, for the latter is merely simple redness without appreciable thickening of the skin, itching indeed, but ending in slight desquamation.

Erysipelas creeps over the skin, eczema is stationary; erysipelas runs its course in a week or two, is not dotted with red points, and has blisters on its surface.

Herpes has its vesicles in clusters, the vesicles are larger, remain longer, and are not replaced by fresh crops as in eczema.

Scabies has been taken by contagion; it frequents the parts between the fingers, and about the joints; if there be doubts, scrape the garments that have been worn next the eruption, and the microscope will show the eggs of the acari. (If eczema be upon the hands alone, it is not likely to be between the fingers, Ed.) When it cannot be decided, treat the case primarily for the itch.

Prognosis.—Our author remarks that this is seldom serious, for however great the irritation and disfigurement, it is almost invariably curable. A great deal of nonsense has been written, he says, about the danger of suddenly 'driving in' a severe or chronic eruption like eczema, and that he has treated hundreds of cases, many of which were nearly covered with eruption, and yet he has rarely witnessed even a temporary ill effect from its rapid subsidence, and never a permanent one, when proper precautions have been taken. Where untoward symptoms are to be feared, he orders a calomel purge to be occasionally administered.

Cases of eczema, he continues, would occasionally get well in a few weeks without the aid of remedies, others would probably last for months, or for years; and never entirely disappear, unless subjected to treatment.

Eczema is a very capricious disease, and relapses are liable to occur at any period, without regard to the treatment.

It is not usual, he observes, for eczema to leave any scars, or marks, nor any discoloration that does not fade and disappear with time.

But interesting as this portion of the work is to us, our limited space imperatively calls us away; we will therefore proceed at once with his excellent remarks on the treatment.

The Treatment.—The first attention should be to rectify deviations from the normal standard of health.

Purgatives are very useful in eczema, but should be selected according to the features of the case. When the tongue is loaded, the patient weak, the appetite bad, the liver torpid, and the bowels costive, he combines quinine with small doses of rhubarb, and mercury-with-chalk.

Rhubarb, 6 grs.: Mercury with Chalk, 3 grs.
Quinine, 2 grs.: mix.

For a dose, to be given to an adult, and repeated morning and evening, if required as frequently, to produce a natural evacuation of the bowels daily.

If the liver be torpid, and the patient robust, he orders a brisk purgative of calomel and scammony weekly.

When living high and refusing to diet, a little tartar emetic may be added to his medicine, to reduce his desire for eating.

The scrofulous and the debilitated require cod liver oil, and tonics, especially iron; and the latter should be ordered nutritious food. He tells us that he has repeatedly cured the severest cases of eczema by the systematic administration of cod

liver oil, and the syrup of the iodide of iron, all other treatment of importance being omitted.

Children who are suckling over their time, should be weaned without delay: if suffering from diarrhoea, it will frequently prove to be the result of debility alone, and be found to disappear spontaneously by attention to the diet and general health.

In low states of the system, resort to spirituous liquors may occasionally be necessary, but as a general rule their employment should be ventured on with caution.

When the appetite is very deficient, quinine may be substituted for the iron for a time; if too weak for quinine, diluted sulphuric acid alone may be tried, as it is usually well borne.

When the patient is seemingly in perfect health, our author finds that the best means of producing an effect upon the system at large, is the occasional employment of purges of calomel and colocynth pills, especially when the eruption is any way extensive. Sulphur and cream of tartar is also a favourite and excellent laxative in such cases. The diet must be restricted to simple animal and vegetable food, and spirituous liquors suspended for a time.

The three internal remedies in which our author places most reliance in such cases, and, to a certain extent, in the scrofulous and weak, are arsenic, sulphur, and the alkalis.

Fowler's Solution.—This solution he commences in five minim doses, administered three times a day, after eating; and the following week, increases them a drop every second or third day, until the disease begins to yield, or the medicine disagrees with the system. He does not stop its employment for a slight irritation of the eyes, or a puffiness of the face, unless they are aggravated, and accompanied by pains in the stomach and head, loss of appetite and nausea; on which, he orders the dose to be diminished, or perhaps to be stopped for a few days, but never suspends it altogether. Arsenic, he says, is too often abandoned at the moment its curative powers are just coming into play.

Patients taking arsenic are easily affected by cold, and bronchitis is often developed for want of this knowledge. If the stomach be easily deranged by arsenic, a small quantity of morphine may be added to the solution. As the disease is yielding, the arsenic may be gradually diminished, but never suspended, till some time after the complete removal of the eruption.

In cases of infants at the breast, it is advisable to administer the remedy to the mother. To children of one or two years, a minim may be given twice daily, and the dose be gradually increased.

If Donovan's Solution be preferred, the commencing dose for an adult would be 10m. three times a day, likewise to be gradually increased.

If arsenic with iodine alone be desired, Nelligan's ioduretted solution of the iodide of potassium and arsenic will be found a very good preparation. It is one that is frequently employed in eczema, and is made as follows:

Fowler's Solution, 80 minims: Iodide Potassium, 16 grs.: Iodine, 4 grs.: Syrup of Orange Flowers, 2 oz.
A teaspoonful in a wineglass full of water, three times a day, after meals.

Sulphur, internally, proves frequently serviceable in persons of lymphatic temperament, and whose eczema is on the decline.

Alkalis are not so generally employed as arsenic and sulphur in the treatment of eczema. They

are most beneficial when the patient is much addicted to the use of stimulants, and when there is a tendency to acidity of the stomach, and to the deposits of lithates in the urine, or to gout or rheumatism.

Liquor Potassæ.—Twenty minims should be given largely diluted, three times a day.

Sesqui-carbonate of Ammonia.—This alkali is the one he is most in the habit of using. He gives it in gradually increasing doses from 10 up to 30, or even 40 grs., three times a day. Like the potash it should be given largely diluted with water, (in milk, &c.) and be gradually increased, until it disagrees, or the eruption begins to fade.

Local Treatment.—The first point to be attended to, when crusts have been formed, is to get them away, and to keep them constantly removed. This is a very easy matter, and every practitioner has his own favourite mode of procedure. Our author recommends a poultice composed of crumbs of bread and hot almond oil, to be applied to the eruption at night, and fresh almond oil, if necessary, in the morning. (We usually direct a warm linseed poultice, with a sprinkling of carbonate of soda on its surface.—Ed.)

When the eruption has just made its appearance, and the surface is acutely inflamed; when it is studded with numerous vesicles, or pustules; but particularly when burning heat is experienced in place of itching; local sedatives must be employed. A potato-starch poultice, with a small quantity of a powder containing camphor, sprinkled over its surface, is one of the best means of relieving the burning heat.

The Powder.—Camphor 30 grs.; Alcohol, q. s.; Oxide Zinc, and Starch, of each 3 drachms. Make a paste of the Camphor, by means of a few drops of the Alcohol, then make a mixture with the other ingredients, by triturating them well together in a mortar.

A little to be sprinkled over the parts, or upon the poultice, occasionally, when required to relieve the pain.

Or emollient ointments may be employed, as the benzoated zinc ointment, which is made as follows:

One drachm of Benzoin is exhausted in 6 oz. of Lard, kept liquid for twenty-four hours in a close vessel, and stirred occasionally. After which it is strained, and 1 oz. of the Oxide of Zinc added to it.

Or the simple oxide of zinc ointment, or cold cream, or cucumber ointment, may be employed. The following is also an excellent preparation, and is much more agreeable than any mentioned, for cooling the parts, and allaying the burning heat.

Camphor 2 scr.; Ox. Zinc. ½ oz.; Glycerine 2 oz.; Carniline 2 grs.; Otto Rose 3 drops.

Triturate the camphor into a thick paste with a few drops of alcohol; rub in the carniline, then the oxide of zinc, and afterwards the other ingredients.

3. Stir the mixture, and smear a thin layer over the inflamed part twice or three times a day.

When a cheaper preparation is required, oil may be substituted for the glycerine, and the perfume and colouring be omitted.

When the disease becomes chronic, and the burning heat is replaced by itching, the local applications require to be very different. If the infiltration is slight; or the rash extensive; common soft soap (*sapo molle*), or a solution of it of one part to two of boiling water, with a little perfume to conceal the odour, may be used: a piece of flannel dipped in this should be rubbed as firmly as possible over the affected parts night and morning, and the solution be allowed to dry upon them, washing it off before each re-application; or a flannel wrung out of the solution may be applied to the part, and left in contact with it all night if the patient can bear it.

A more elegant preparation is the liquor potassæ of the pharmacopœias, employing it in its full strength; it may be painted over the eruption night and morning with a large brush, its irritant properties being neutralized by means of cold water when the smarting becomes excessive.

Solutions of potassa fusa may also be used in the proportions of 5, 10, 20, or even 30 grains to the ounce of water, according to the severity of the case; the stronger being washed off immediately after their application; and be used but once a-day. Hebra sometimes employs a drachm solution, and even the soliu caustic itself, washing it off immediately afterwards.

When the skin has a tendency to be dry, and to crack, cod liver oil or glycerine may be applied to the parts at night.

Chloride of zinc, 20 grs. to the ounce of water, is likewise a very useful application, and often acts speedily in removing the infiltration and itching.

When any of these irritants are made use of, they cause smarting; and if strong, considerable pain; but patients generally prefer these to the itching.

When some parts are more infiltrated than others, solutions of different strength must be employed, and as the infiltration of the skin is subsiding, the strength of the solution must be reduced. And when applied to infants or delicate or aged females, they should be weaker, and less frequently used.

Whilst employing these alkaline preparations the parts must be kept cool by bathing repeatedly with cold water, which may also be allowed to fall upon them from a height; and cold wet cloths be kept to them during the intervals.

Scratching always aggravates the disease, the patient should therefore be exhorted to refrain from it as much as possible. When the itching becomes insupportable, let the following lotica be applied: Hydrocyanic acid (Scheele's) 3m.; Glycerine or Water 1 oz.

It may be increased in strength to half a drachm of the acid, but this must not be used over an extensive surface, and the patient should be warned of its poisonous nature. This solution may be added to that of the potash employed.

Cyanide of potassium may be added to cold cream, or the benzoated oxide of zinc ointment, in the proportion of from 5 to 10 grains to the ounce, and the parts be rubbed firmly with it when itchy; care must however be taken not to allow any of this strong ointment to remain undissolved upon the skin.

Common tar is an excellent application in eczema; it should be rubbed firmly over the eruption, by means of a piece of flannel, twice a-day, and be allowed to dry upon it, and washed off as well as possible before each fresh application, with soft soap. Our author commonly combines the tar with the potash solutions, and does not cease to employ the latter whilst the infiltration is considerable. The oil of cade is a nicer preparation than tar, but is much more expensive.

Mercurial Ointments.—Citron ointment; that of red or white precipitate; or the green iodide of mercury (1 drachm to the ounce); may be rubbed into the parts three times a-day, either of full strength or reduced with lard; and, if required, a few grains of the cyanide of potassium may be added to each ounce to allay the itching.

A solution of the bichloride of mercury, 4 grs. to the ounce of rose water, with a few drops of hydrocyanic acid when required, may be employed if a liquid be preferred.

Should the slightest tendency to salivation be discovered, these preparations must be suspended.

Sulphur Ointment—is an old and good remedy, or a drachm of sulphur may be mixed with an ounce of alcohol, and rubbed well into the affected parts.

His rules for applying ointments are excellent; we subjoin them:

How to apply Ointments.—When ointments are to be applied to eczematous eruptions, a very small quantity should be melted on the point of the finger, and rubbed firmly into the affected part. And none of it should be allowed to lie undissolved upon the skin; nor in most instances, should its colour be perceptible after its application; the surface should merely have the appearance of having been moistened with pure water. The part should always be cleaned with soap and water before re-applying the ointment, otherwise it is apt to become rancid, and irritate the skin.

Prophylactic.—To prevent a threatened attack of eczema, or obviate the occurrence of an immediate relapse, the skin may be washed occasionally with soft soap and water.

Blisters.—Of all the local means for the removal of limited eczematous eruptions, none are equal to blistering them; the best agent for this purpose is glacial aceticum cantharidis (glacial acetic acid 5 fl oz., cantharides 1 oz. To stand for eight days before straining and filtering). The part should be painted till perfectly white; it usually blisters at once; a hot poultice must next be applied. One application is often sufficient to remove the eruption, but it may be repeated weekly if necessary, the crust being previously softened and removed. A drachm solution of the bichloride of mercury to the ounce of alcohol, is a favourite blister with some authors; it acts well and does not seem to affect the system at large; it is to be painted over the eruption, and be allowed to dry upon it.

Tincture of Iodine.—This is likewise a remedy of much value when the eruption is limited. It should be painted over the part night and morning; and a hot bread poultice be applied once a week, to remove the dark dead skin which forms upon the surface.

The remaining chapters are devoted to the different local varieties of eczema, and their diagnosis from other skin affections, with the variations necessarily occasioned, by situation, in their treatment.

We have now laid this little work under severe contribution, have extracted much useful information from it, many facts indeed with which, we have not hitherto been acquainted; but they are but a small portion of all that are contained within its valuable pages, every one of which is replete with them, not spun out to make a large book, but seemingly to show how much could be said in a small one. We like such books.

To Correspondents.

Solution Muriate of Tin.—The solution of the bichloride, commonly called permuriate of tin, so much employed in dyeing, is prepared by adding tin, in small quantities at a time, to a mixture of two measures of muriatic and one of nitric acid with one of water, until saturated. One portion of tin should be allowed to disappear before another is put in, otherwise, the action becoming too rapid, the tin is apt to be thrown down as an oxide, when it is with difficulty re-dissolved. To reduce the tin into small particles, melt the bar or grain tin in an iron pot, and stir briskly whilst cooling.

French Liquid Bluing.—Calomel blue in powder 1 lb.; oxalic acid 1 lb.; boiling water 3 quarts. Your failure has probably been from having employed the ordinary Prussian blue. It is used for bluing cloths after washing.

Toilet Powder.—Corn starch 3 lbs.; pulv.orris root 2 oz.; otto of roses, 8 drops. Mix and sift.

Medical Works published in Great Britain from the 15th January, to the 1st March, 1864, with the sizes, numbers of pages, publishers' names, and price in sterling.

Caillaud.—A Practical Treatise on Diseases of the Skin in Children, Notes, &c. by Blake. 12mo. ss. 6d. (Churchill.)
Laurie, (James).—The Roman or Turkish Bath, together with Baræge, Medicated, Galvanic, and Hydropathic Baths. 12mo. pp. 292, 5s. (Simpkin.)

Lee, (Robert).—Three Hundred Consultations in Midwifery. 12mo. pp. 229, 4s. 6d. (Churchill.)

The British Pharmacopœia, published under the direction of the General Council of Medical Education and Registration of the United Kingdom, pursuant to the Medical Act of 1858. 8vo. pp. 464, 10s. 6d. (Spottiswoode.)
Chavasse, (P. H.).—Advice to a Mother on the Management of her Offspring. 7th edit. 12mo. pp. 324, 2s. 6d. (Churchill.)
Cotton, (R. P.).—Phtisis and the Stethoscope; or, the Physical Signs of Consumption. 3rd edit. 12mo. pp. 113, 3s. (Churchill.)

Graves, (Robert G.).—Clinical Lectures on the Practice of Medicine. New edition, reprinted from the 2nd edition. Edited by the late J. M. Neligan. To which is prefixed Criticism by Prof. Trousseau of Paris. 8vo. pp. 888, 11s. (Simpkin.)

Mackenzie, (Morell).—Hoarseness and Loss of Voice, treated by the direct Application of Galvanism to the Vocal Cord. 12mo. 1s. (P. Richards.)

Kitchell, (G.).—Researches on the Solar Spectrum, and the Spectra of the Chemical Elements. 2nd Part. Translated by Henry E. Roscoe, 1to. 2s. (Macmillan.)

Hulme, (Robert Thomas).—The Teeth in Health and Disease; with Practical Remarks on their Management and Preservation. Illustrated by Wood Engravings. 12mo. pp. 232, sewed, 2s. 6d. (Baillière.)

Althaus, (Julius).—On Paralysis, Neuralgia, and other Affections of the Nervous System. 3rd edit. 12mo. pp. 24, 3s. 6d. Trübner.

Miller, (James).—A System of Surgery. 8vo. pp. 1416, 21s. (Longman.)

Periodicals received since 15th February.

London Medical Times to February 27th. British Medical Journal to Feb. 27th. American Medical Times to March 5th. Boston Medical and Surgical Journal to March 5th. Pacific Medical and Surgical Journal, San Francisco, January. San Francisco Medical Press, January. Clinician, Lancet and Observer, February. Chicago Medical Examiner, January and February. Chicago Medical Journal, February. Philadelphia Medical and Surgical Reporter, February 27th. Philadelphia Dental Cosmos, March. London Publishers' Circular, to 16th February. American Drug Circular, March. London Chemist and Druggist, to 1 February. London Pharmaceutical Journal, March.

Books and Pamphlets received during the Month.

Clinical Memoirs on the Diseases of Women. By I. McClintock, M.D., F.R.C.S., late Master of the DeLormain Hospital. 8vo. pp. 414, 18s. 6d. (Longman.)
Catalogue of Surgical Instruments, Apparatus, &c. &c. Nicely illustrated. J. Weiss & Son, 1863.

The British Pharmacopœia.
Illustrations of Dissections. By Ellis & Ford, parts 4 & 5. Nov. 1863. (Walton & Maberly.)

Annual Report of the New England Hospital for Women and Children. Boston, Nov. 1863. From Dr. H. E. Smith, attending Surgeon.

First year Subscriptions paid since 15th February.

Dr. L. D. Glazebrook, San Pierre, Indiana.

Second year Subscriptions paid since 15th February.

H. Gray, Esq., E. J. Devins, Esq., Dr. Hicault, Dr. J. H. Trevelyan, of Montreal; Dr. D. J. VanVelsor, Bond, East, C. Dr. J. Z. Nault, Dr. Jno. Racey, Quebec, Dr. O. Yarns, H. Kertland, Esq., Kingston; Jas. Tully, Esq., Hantsport; Dr. H. B. Storer, Boston; Dr. John Hyndman, Exeter; Ardagh, Dr. G. H. Corbett, Orillia; Judge Gowen, Esq., Dr. D. Gillespie, Camington; Dr. O. C. Wood, Winchester; Dr. G. D. Spooner, Clarke; Dr. Mienault, St. Denis; D. Munro, Fergus; Dr. Lightbody, Douglass; Dr. T. S. Munn, Ste. Rose de Lima; Dr. A. M. Rosebrugh, Toronto; Dr. J. A. Mullin, Hamilton; Dr. James Walker, St. J. N. B.; C. J. Tyler, Esq., Erin; Dr. Philtraut, St. Timothee; Dr. J. T. Smith, Buffalo; Dr. T. Charcut, Beauport; Dr. Robinson, Oshawa; Dr. P. Provost, Montreal; Dr. G. Muter, Shakespare; Dr. John Rolph, Toronto; Dr. A. Gatzbrook, San Pierre, Ind.; Dr. Jackson, Woodville.

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