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[No. 5.

Special Selections.

EMPLOYMENT OF CARDIAC SEDATIVES IN HEART DISEASE.*

By H. A. HARE, M.D.,

Professor of Therapeutics in the Jefferson Medical
College of Philadelphia.

The writer desires in this article to call attention to the treatment of heart disease in its various forms by the use of drugs utterly different in their physiological and therapeutical effect from digitalis or other cardiac remedies of a *stimulating* character. He refers chiefly to the use of aconite, veratrum viride, and gelsemium, and, while he is well aware that these drugs have been largely used for such a purpose by others, he is also confident that they are not employed by as many of the profession as so useful a method deserves.

We are inclined to believe that a diseased heart needs stimulation rather than sedation. It has often seemed to me that those who use

nitroglycerin for its stimulant power over the heart were in reality getting good effects because it acted as a sedative.

There is no doubt that digitalis is much abused in heart disease. We see it prescribed for the patient in whose chest a cardiac murmur exists, without any effort on the part of the physician to determine whether it is really needed. In other words, digitalis is used as if it would grow a new valve and so remove a murmur by stopping a leak, when in reality the murmur must always exist. The object to be attained is the preparation of the heart so that it can make up for the leak by greater and more accurately adjusted effort. In many instances a condition of nervous flurry seems to seize upon the heart muscle which is exposed to the irritation of a leaky valve. These nervous flurries are divisible into two classes: *first*, those in which the demands of the system are greater than the heart can meet, and in which the heart fails because it cannot stand the strain; *second*, those in which the heart is able to meet the demands made upon it upon ordinary occasions, but be-

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comes nervously upset,—just as in one case a firm fails because it cannot meet its obligations, and in another case it fails because at the critical moment its members lose confidence and go to the wall. The first class need rest and digitalis; the second class need rest and aconite. In other words, the first must have aid or perish, the second need quiet confidence to weather the strain. The two following cases illustrate these varieties of cardiac difficulty:

J. A—, a merchant, aged 48, married, and healthy till three years ago, when he had *la grippe*. A close questioning recalls to his mind that at the age of 21 he had rheumatic fever, and that his physician told him that his heart was “touched.” Ever since having *la grippe* he has had some shortness of breath on exertion and some feeling of cardiac palpitation or oppression. Three months ago he noticed his feet were slightly swollen and that he had difficulty in getting on his shoes. The urine was decreased in amount. Indigestion now came on, and the gastric distress increased his cardiac difficulty.

Physical examination showed a loud mitral murmur, systolic in time, with a very feeble, distant and diffused apex beat. The heart sounds were feeble and distant, and the pulse irregular, soft, and easily extinguished. There was marked increase in the area of cardiac dulness. The urine contained traces of albumen, but no casts. These signs, with the symptoms already detailed and the feeble appearance of the patient, seemed to indicate the use of digitalis, which was accordingly given with a little *nux vomica* three times a day—with

very good results, the swelling, indigestion, oppression and palpitation all passing away.

The second case was that of a man who had developed a mitral regurgitant murmur after an attack of rheumatism three years before. He had no œdema, but some cyanosis, which increased very markedly on exertion. There was also some shortness of breath, but the dominant or most annoying symptom was palpitation and a sense of swelling or bursting of his heart on exertion or after a full meal. The extremities were often cold and clammy, and his mental state was that of great fear lest his heart should suddenly stop beating. Physical examination showed a forcible apex beat not greatly diffused, a well-marked murmur with a clear second sound, a somewhat irritable pulse, and a full artery not easily compressed. The area of cardiac dulness was somewhat increased, but not as greatly as in Case 1; and the impression produced was that of a powerful heart with a leaky valve in which compensation, so far as muscular power was concerned, was complete, but in which nervous compensation or adjustment was poor. Aconite in the dose of one minim of the fluid extract three times a day, and rest in bed, produced a very rapid improvement.

In the first case the heart was feeble and needed aid. In the second it was strong but using its strength ineffectively, and was in need of steadying or confidence. To have given aconite in Case 1 would have been wrong; and while digitalis might temporarily have steadied the heart of Case 2 it would ultimately

have failed and caused the compensation to be excessive.

So much for these two varieties of cases.

There is a third variety, in which the heart often receives digitalis without good effect at all, and rapidly gains under aconite. These are cases which have excessive compensatory hypertrophy coming on naturally or as a result of severe labor followed by easier methods of earning a living. The following case illustrates the class :

A man, aged 19, was brought to the Jefferson Medical College Hospital suffering from aortic obstruction, and, as a result of this, dyspnoea on the slightest exertion, marked cardiac arrhythmia, with palpitation, some giddiness, and a tendency to nose-bleed. He stated that in the early part of the year, and for several years preceding, he had been a deck-hand on a coast-wise vessel, where he performed hard manual labor, notwithstanding the condition of cardiac disease which was present and of which he knew nothing. During this time he suffered from no symptoms indicating cardiac disorder. In other words, compensatory hypertrophy was complete. Because of the exposure incident to the work, he was forced, under the advice of a physician, to earn his living on shore. He was unsuccessful in trying to secure employment, and a prolonged period of muscular inactivity followed. As a consequence of this, the cardiac hypertrophy, which had hitherto been compensatory, was now excessive, and he suffered from marked cardiac palpitation, with disordered circulation in the extremities, and from a considerable

amount of cough. Very early in the study of the case it was recognized that these disorders were due to the excess of cardiac hypertrophy, and not to failure in compensation, and, as a consequence, that a cardiac depression was indicated rather than a cardiac stimulant in the shape of digitalis.

He was given from one to two minims of the fluid extract of aconite three times a day, and during the continuance of this treatment was purposely confined to his bed. At the end of the week so much improvement had taken place in his condition that he was allowed to rise and go about the ward, as he wished ; and after four weeks, the medicine being continued during this period, he was so well that he was discharged from the hospital with no other evidence of cardiac disorder than physical examination would show.

A very important portion of the treatment of these cases by the use of aconite is rest in bed, as prone as possible. This fulfils the necessary requirements of sedative treatment, and enables you to push the aconite more actively than if the patient were moving about.

Next to aconite as a remedy of value in these cases stands, I think, gelsemium, and after this veratrum viride.

There still remain two classes of cases to be briefly mentioned, namely, those who have one or two forms of so-called functional cardiac disorders as the result of athletic exercise or severe toil. In the one set the heart possesses all the signs of dilatation, feebleness, and failure. In the other there is to be found a great hyper-

trophied organ thumping away in a chest which seems too small for it. In both, muscular effort results in palpitation and dyspnoea, sometimes in præcordial pain. In the first, digitalis is useful; in the second, aconite or gelsemium find their place.

In the cases where an excessively rapid pulse is present constantly, or only at times, veratrum viride is the better drug and gelsemium seems to surpass aconite.

REMEDIES INTRODUCED IN 1894.*

Acctogen.—Used in manufacturing vinegar.

Aceton (not "Acetone").—Grip and headache remedy.

Acetonoresorcin.—Combination of two molecules of resorcin and one of acetone. Antiseptic.

Acid, Glycero-inophosphoric.— $(HO)_2PO.O.C_3H_6.OH$. Nervine.

Adonis Æstivalis, Tincture.—Anti-fat remedy.

Algodyne.—Proprietary tooth tincture.

Alphol.—Salicylic ether of alpha-naphthol. Internal antiseptic, like salol.

Aluminum Boroformate.—Disinfecting astringent.

Ammonol.—"Derivative of the Amidobenzene series." Stimulant, analgesic, and antipyretic.

Amylocarbol.—Mixture of nine parts of carbolic acid soap (150), amylic alcohol (160), and water (681). Antiseptic.

Anadol.—Proprietary antipyretic and analgesic.

Analgesin.—Tablets containing acetanilid, ammonium chloride, caffeine, and sodium bicarbonate. Analgesic. ("Analgesin" is a French synonym of antipyrin).

Analgia.—Proprietary analgesic and antipyretic.

Analgine-Laborde.—Another proprietary analgesic.

Andunca.—Proprietary analgesic.

Anodin.—Proprietary ophthalmological anæsthetic.

Antalgia.—Proprietary antipyretic and analgesic.

Antibacillin.—Proprietary disinfectant.

Anticlavus.—Proprietary pain-reliever.

Antidiphtheritikon.—Bokai's mixture of oil birch (5), oil beech (3), alcohol (90), potassium carbonate (1), and potassium sulphide (5). Diphtheria remedy.

Antidol.—Proprietary pain-reliever.

Antidor.—Proprietary anodyne.

Antifetor.—Proprietary deodorizing powder.

Antipyonin.—Sodium tetraborate, soluble.

Antipyralgine.—Proprietary anodyne.

Antipyralgos.—"Coal tar derivative." Proprietary antipyretic and anodyne.

Antirheumatin.—Mixture of sodium salicylate and methylene blue. Antirheumatic.

Antitetrazin.—"Quinine derivative." Anodyne.

Antithermal.—Proprietary febrifuge.

Antitoxine.—Proprietary antipyretic and anodyne. (Not to be con-

* *American Medico-Surgical Bulletin.*

founded with the generic term "Anti-toxin," the blood-serum of immunized animals.)

Apodyna.—Proprietary anodyne and antipyretic.

Arecoline Hydrobromate.—Salt of alkaloid from *Areca Catechu*. Laxative in veterinary medicine.

Argentamine.—Ethylenediamine-silver phosphate solution. A 1:10 solution of silver phosphate in 10 per cent. ethylenediamine solution. Antiseptic astringent.

Arophene.—Proprietary dental anæsthetic.

Athanon.—Proprietary disinfectant.

Atherin.—Ammoniated pyrogallol solution. Hair-dye.

Bacillin.—Proprietary deodorizer and disinfectant.

Backerine.—Proprietary "yeast cure for phthisis."

Benzacetine.—Acetamidomethylsalicylic acid. Anti-neuralgic.

Bismuth and Sodium Iodide.— $\text{BiI}_3 \cdot 4\text{NaI}$. Alterative.

Bismuth-Naphthol Hydrate.—Chapin's antiseptic.

Bismuth Sulphocarbolate.—Antiseptic astringent.

Boral.—Aluminum borotartrate. Disinfecting astringent.

Borosalicyl.—The result of the action of boric acid (25) upon sodium salicylate (32). Antiseptic.

Brassicon.—Proprietary headache remedy.

Bromalin.—Bromethylformin. Anti-epileptic.

Caffeine Oxalate.— $\text{C}_8\text{H}_{10}\text{N}_4\text{O}_2\text{C}_2\text{H}_4\text{O}_2$.

Calcium Glycerinophosphate.— $\text{CaC}_3\text{H}_7\text{PO}_6$. Nervine.

Calolactose.—Mixture of calomel

(1), bismuth subnitrate (1), and lactose (8). Intestinal disinfectant.

Cannabindon.—Narcotic principle obtained from *Cannabis Indica*.

Cannonin.—Proprietary disinfectant.

Capitcura.—Proprietary antipyretic and anti-neuralgic.

Carbolin.—Coal-tar disinfectant.

Chemia.—Antiseptic.

Chlorakaline.—Proprietary remedy like bromidia.

Chloriodolipol.—Chlorinesubstitution product of phenol, creosote, and guaiacol. Inhalation antiseptic.

Chroaol.—Parasiticial dermic.

Chromosot.—Chiefly sodium sulphite and sulphate. Disinfectant.

Cocaine Lactate.— $\text{C}_{17}\text{H}_{21}\text{NO}_4\text{C}_3\text{H}_5\text{O}_4$. Specially adapted in the local treatment of tuberculous cystitis with lactic acid.

Collasin.—Schiff's skin-varnish.

Coronillin.—Glucoside from *Coronilla scorpioides*. Cardiac.

Cryostase.—Mixture of equal parts of carbolic acid, camphor, and saponin, with traces of turpentine oil. Becomes solid when heated, and liquid when cooled to below 0°C .

Crystalline Modified.—Solution of pyroxylin (1) in a mixture of methylic alcohol (4) and amyl acetate. Dermic.

Cutal.—Aluminum borotannate. Disinfecting astringent.

Cutal Soluble.—Aluminum borotanno-tartrate.

Dermol.—Bismuth chrysophanate. Astringent dermic.

Dermolin.—Proprietary ointment-base (soap).

Diaphthol—Quinaseptol, Orthoöxyquinolinemeta-sulphonic acid. Internal antiseptic.

Diatomit.—Disinfectant.

Diiodoform. — Tetraiodoethylenic. Antiseptic.

Diphthericide.—Pastilles of thymol, sodium benzoate, and saccharin. Prophylactic against diphtheria.

Emulsin.—Paraffin oil oxidized under pressure. Emulsifier.

Entomofobo.—Insect-killer.

Eurybin.—Glucoside from *Eurybia moschata*.

Farcol.—Proprietary anodyne and antipyretic.

Febrinol.—“Coal-tar product.” Anodyne and antirheumatic.

Ferratin.—Compound of iron extracted from the liver of the hog. Contains 6 per cent. Fe. Hæmatinic.

Fostite.—Insect-destroyer.

Gallal.—Aluminum gallate. Astringent.

Genetica.—Proprietary remedy for gonorrhœa.

Glycogelatin.—Ointment base.

Glycoline.—A petroleum oil for use in atomizers.

Guaiacolin.—Proprietary emulsion of cod liver oil.

Hæmalbumin.—Dietetic preparation containing the salts and albumoses of blood.

Illodin.—Proprietary cosmetic.

Ingestol.—Proprietary stomachic mixture.

Iodocasein.—Antiseptic.

Iodoformin.—Derivative of formaldehyde. Antiseptic.

Iodophenochloral.—Mixture of equal parts iodine tincture, carbolic acid, and chloral hydrate. Parasitical dermic.

Iodsuccinimide.—Succedaneum for iodoform.

Jessanodine.—Proprietary antiseptic and analgesic.

Kaputine.—Said to be colored acetanilid.

Katharine.—Tetrachlormethane, carbon tetrachloride.

Kephaline.—Proprietary headache remedy.

Klinol.—Proprietary antipyretic and analgesic.

Kreplinum.—Tincture Panama bark mixed with small quantities of aromatic oils.

Kressapol.—Disinfectant.

Lactol.—Lacto-naphthol, lactic ether of beta-naphthol. Intestinal antiseptic.

Lactophenin.—Paralactophenetidin. Substitute for phenacetin.

Liquor Anthracis Compositus.—Liquor anthracis simplex admixed with sulphur, resorcin, and salicylic acid. Antiseptic protective.

Liquor Anthracis Simplex.—A preparation of tar. Protective.

Liquor Antisepticus, Volkmann.—Solution of thymol (1) in mixture of alcohol (10), glycerine (200), and water (100).

Listol.—“Compound of thymol and iodine.” Antiseptic.

Loretin.—Metaiodoorthoxyquinolineansulphonic acid. Antiseptic.

Lucilline.—A pure petroleum jelly.

Luperine.—Mixture of powdered gentian, columbo, and quassia. Remedy against dipsomania.

Lycetol.—Dipropylenediamine. Solvent of uric acid.

Lysidine.—Ethylene diethenyldiamine. Uric acid solvent.

Malakin.—Salicylaldehydparaphenetidine.

Mercury and Potassium Hyposulphite.— $3\text{Hg}(\text{O}_2\text{O}_3)_2 + 5\text{K}_2\text{S}_2\text{O}_3$. Specially adapted to subcutaneous injection.

Migrainin.—Citrate of antipyrin-caffein. Anti-neuralgic.

Neurodin. — Acetylparaoxyphenylurethane. Anti-neuralgic and nervine.

Nutrin.—Dietetic food, representing, according to the manufacturers, "the pure nutritious substance of meat."

Odontodol.—Mixture of cocaine hydrochlorate (1), cherry-laurel oil (1), tincture arnica (10), and solution ammonium acetate (20). Dental anodyne.

Orchidin.—Prof. Boehl's testicular fluid. Nervine.

Oxycanthine.—Alkaloid from barberry bark.

Ozalin.—Mixture of calcium, magnesium and iron sulphates, with caustic soda and magnesium. Disinfectant.

Paicoline.—Proprietary stomachic.

Paraform.—Polymeric formic aldehyde. Intestinal disinfectant

Pelagin.—Solution of antipyrin, caffeine, and cocaine. Sea-sickness remedy.

Phenatol.—Mixture of acetanilid, sodium carbonate, bicarbonate and chloride, and caffeine. Antipyretic and anodyne.

Philopaidia. — Proprietary diphtheria remedy.

Phoenixin.—Carbon tetrachloride. Succedaneum for benzene.

Phospherrin.—Mixture of a solution of ferric chloride, phosphoric acid, and glycerine.

Pomegranine. — Alleged alkaloid from the rind of pomegranate fruit. Local anæsthetic.

Pyretine.—Proprietary antipyretic and analgesic.

Resorbin.—Ointment base consisting of almond oil, wax, soap, and water.

Rhinosclerin. — Extract prepared

(like tuberculin) from pure cultures of the rhinoscleroma bacilli. Remedy against rhinoscleroma.

Salactol.—Sodium salicyl lactate. Anti-diphtheritic.

[Salacotol.—Salicyl-acetol.] Intestinal antiseptic.

Sal Anæstheticum.—Generic name for Schleich's mixtures of cocaine and morphine hydrochlorates, with or without codeine phosphate.

Salifebrin. — Salicylanilid, antifebrin salicylate [?]. Antipyretic and anodyne.

Salubrin.—Mixture of acetic acid anhydride (2 per cent.), acetic ether (25 per cent.), alcohol (50 per cent.), and water (23 per cent.). Antiseptic and hæmostatic.

Salumin, Soluble.—Aluminum and ammonium salicylate. Disinfecting astringent.

Sapocresol.—Disinfectant.

Scopolamine Hydrobromate.—Salt of an alkaloid from *Scopolia atropoides*. Mydriatic.

Solphinel.—Mixture of borax, boric acid, and alkaline sulphites. Antiseptic.

Spasmotin. — Sphacelotoxin, poisonous element of ergot. Oxytocic, like ergot.

Symphorol. — Formerly called "Nasrol." Generic name for the salts of caffeine-sulphonic acid: "L"—lithium, "N"—sodium, "S"—strontium salt. Diuretics.

Tannigen.—Acetyltannin. Intestinal astringent.

Tannon.—Remedy against foot-and-mouth disease.

Terraline. — Name of a special petroleum jelly.

Thermodin.—Acetylethoxyphenylurethane. Antipyretic.

Theolin. — "Distillate from an American species of pine." Substitute for benzine.

Thermotaxine.—Proprietary analgesic and antipyretic.

Thiosapol.—Generic name of a group of soaps chemically combined with sulphur.

Thymenthol.—Proprietary antiseptic.

Thymozone.—Proprietary antiseptic.

Traumatol.—Iodocresol. Substitute for iodoform.

Tricresol.—Purified natural mixture of the three cresols of coal tar. Antiseptic.

Tricresolamine.—Ethylenediamine-tricresol solution. Mixture of equal parts ethylenediamine and tricresol. Antiseptic.

Triformol. — Paraformaldehyde. Antiseptic.

Tussol. — Antipyrin amygdalate. Whooping-cough remedy.

Vaselon.—Solution of stearon and margarone in neutral mineral oil. Ointment base.

Vasogen. — Oxygenated vaseline. Sulpholeated mineral oil miscible with water. Absorbent vehicle.

Vasogenius. — Concentrated solutions in vasogen.

Vasogens.—Weak solutions in vasogen.

About the earliest symptom of prostatic disease, Prof. Keen says, is an increased frequency of urination, especially at night. This symptom very often precedes any enlargement that can be discovered either by rectal examination or by the use of the catheter.

ANIMAL DRUGS OF PRESENT PHARMACOPŒIAS.*

By OSCAR OLDBERG.

The times of "album Græcum," the "fat of a vulture," the "head of a coal-black cat burnt to ashes in a new pot," and sundry other remedies of animal origin, have passed away. But many remedies derived from the animal kingdom may still be found in our pharmacopœias.

Musk, castor, ox-gall, cochineal, cantharis, pepsin, pancreatin and cod-liver oil are contained in most of the pharmacopœias; though the four first-named are possibly destined to be discarded before long.

But we find millipedes and scorpions in the Spanish Pharmacopœia of 1884, and there are fifty-eight remedies from animal sources in the "American Homœopathic Pharmacopœia"—a book which is regarded as the standard authority of the homœopathic school of medicine in this country. This work is published by Boericke & Tafel, of New York. From the fourth edition, 1890, I have extracted the following items (which include all animal drugs in the book):

Amphisbœna Vermicularis is a Brazilian snake, the poison of which is used in the form of a trituration made with milk-sugar.

The method generally prescribed for the preparation of triturations of snake-venom is to compress the secreting gland of the living animal, catch the poison on sugar of milk, and then triturate. The "first trituration" is usually made of two parts of the liquid poison to ninety-

* *Bulletin of Pharmacy.*

nine parts of milk-sugar, "two parts" being prescribed instead of one in order to make up for the loss occasioned by evaporation.

Other snake-poisons, made into triturations in the same manner, are obtained from :

Crotalus Cascavella—the Brazilian rattlesnake.

Crotalus Horridus—the common rattlesnake of our country.

Elaps Corallinus—the coral viper of Brazil.

Lachesis—the Brazilian serpent Churukuku.

Naja—the "hooded snake" of Hindostan.

Vipera Redi—the Italian viper.

Vipera Torva—the German viper.

Spiders, plant-lice and other living insects are well represented in the materia medica of the work referred to. These medicines are usually in the form of tinctures which are made by taking of the living animals, one part, crushing them, adding five parts of alcohol, macerating eight days in a cool, dark place, shaking twice a day, and then pouring off the liquid, straining, and filtering. The insects of which such tinctures are made are the following :

Aphis Chenopodii Glauci — the plant-louse from *Chenopodium glaucum*.

Aranea Diadema — the Diadem spider.

Aranea Scinencia—a gray spider, common in this country.

Blatta Americana — the great American cockroach.

Cimex Lectularius—the bedbug. The Pharmacopœia says : "This insect is too well known to require a description."

Doryphora Decemlineata — the Colorado potato-bug.

Formica Rufa—the red ant.

Mygale Lasiodora—a large black Cuban spider.

Oniscus Asellus—the common sow-bug.

Theridion Curassavicum—a spider of Curacoa.

Trombidium Muscæ Domesticæ— "a minute bright-red acarus found under the wings of the common house-fly in Philadelphia."

There are also some "live animals" which it is necessary to "irritate" or "aggravate" by shaking or stirring them up in a jar or bottle before adding the alcohol to make the tincture. These are insects provided with poisons which they are made to "throw off" by this process of "aggravation." If the insects themselves were to be consulted, they would hardly know how to choose between being "crushed" and being "aggravated." The following creatures are "first made mad" before they are destroyed by the alcohol of the homœopathic pharmacist :

Apis Mellifica—the honey bee.

Tarentula Cubensis—the Cuban tarantula.

Vespa Crabro—the wasp.

But the virus of the honey bee is also obtained in other ways, as the following directions will show :

Apium Virus—the virus of bees. "Draw out the sting together with the poison bag from a bee freshly killed. Taking hold of the bag, insert the point of the sting into a small glass tube and squeeze the poison into it.

"Or, take a live bee with a pair of pincers, and allow it to seize a small

lump of sugar. It will immediately sting into the sugar, which will absorb the poison. Repeat this until enough is accumulated to start a trituration."

Asterias Rubens—the star fish—is made into a tincture by cutting up the live animal "finely" and macerating it with alcohol.

Badiga — the green fresh-water sponge found in stagnant waters, which "has a peculiar strong smell as of putrescent crawfish"—is dried, pulverized, and then macerated with alcohol.

Bufo—the toad. "The live animal is fastened to a slab of cork by four strong pins stuck through the webs of the feet. Then the poles of an induction apparatus in action are slowly drawn over the back of the animal, whereupon the poison very soon issues from the dorsal glands. This is removed with a small horn knife and triturated in the proportion of one part to 1,000 parts of milk-sugar, this preparation being equal to the 3x trituration."

Bufo Sahytiensis—a south American toad. "The saliva, obtained by irritating the animal," is prepared by triturating with sugar of milk.

Cancer Astacus—the crawfish. The live animal is brayed in a stone mortar to a fine paste, and covered with twice its weight of alcohol.

Cantharis — Select large, perfect insects (not worm-eaten), rub them to a coarse powder, add five parts of alcohol, macerate eight days, etc.

Castor Equorum—"The blackish excrescence found on the inner side of the fore and hind legs of the horse, above the knee and below the hock joints. It readily exfoliates, and on rubbing emits a peculiar odor."

This "horse castor" is dried, powdered, and triturated with milk-sugar.

Castoreum—The beaver castor is made into a tincture and also into a trituration.

Cervus Brazilicus—Brazilian stag. "A small piece of the fresh hide with the hair on" is triturated with sugar of milk.

Coccinella—the "lady bird." The "live" insects are "pounded to a pulp" and macerated with alcohol to make a tincture.

Coccus Cacti — cochineal. The dried insects, cleansed by agitation with tepid water, are coarsely powdered and then macerated fourteen days with five parts of alcohol.

Cyprinus Barbus—the barbel or carp. A 20 per cent. tincture is made of the fresh roe.

Delphinus Amazonicus—the dolphin of the Amazon. A trituration is made out of the fresh skin.

Guano Australis—Peruvian guano. A trituration is prepared. The guano must be "as fresh as possible."

Hippomanes—"The normally white but usually dark olive-green, soft, glutinous, mucous substance, of a urinous odor, which floats in the allantois fluid, or is attached to the allantois membrane, of the mare or cow, chiefly during the last months of pregnancy." A trituration is made of the dried substance.

Lacerta Agilis—green European lizard. A trituration is made, the entire animal being used.

Lyssin or *Hydrophobinum*—the virus of a rabid dog—is represented by a trituration.

Meloe Majalis—the oil beetle. A tincture is made. The living insect,

not crushed, is drowned in the alcohol.

Mephitis—the pole-cat or skunk. One part of the liquid obtained from the anal glands is mixed with ninety-nine parts of alcohol.

Moschus, musk, is represented by both tincture and trituration.

Murex Purpurea—a sea snail. The juice lodged in a bag between the heart and the liver is the active matter. Exposed to the air, it produces a red color. A trituration is made of it.

Oleum Animale Æthereum—Dip-pel's animal oil. Both tincture and trituration are made.

Oleum Morrhuæ—cod-liver oil. A trituration is prepared with milk-sugar. The "first trituration" contains one minim of the oil and ninety-nine grains of milk-sugar; the "second trituration" is made of one grain of the "first trituration" and ninety-nine grains of milk-sugar.

Pepsinum—Scheffer's pepsin. A trituration is made of it by the usual homœopathic process.

Psorinum—the pus from the itch pustule. Made into a tincture.

Sepia—the inky juice of the cuttle-fish. Both tincture and trituration.

Spiggums Martini—porcupine. A trituration is made out of the prickles taken from the sides of the animal.

Spongia—Both tincture and trituration are made from roasted or toasted Turkish sponge.

Tarentula Hispana—Spanish tar-antula. The live spider is used for making a trituration.

Tela Araneæ—spider's web. A trituration is prepared of recently spun web.

Vulpis Hepar—dried fox-liver.

Vaccinum—vaccine virus. Tri-turation of fresh virus.

Variolinum—small-pox virus. Tri-turation of the contents of a fresh, ripe small-pox pustule.

Vulpis Fel—fresh fox-gall.

Vulpis Pulmo—dried fox-lung.

Triturations are made of the last three drugs. Are these remedies, too, used on the principle of "*Simili similibus curantur?*"

THE USE OF ANTITOXINE IN THE TREATMENT OF DIPHTHERIA IN THE MOABIT HOSPITAL.—Cannon (*Archives Kinderheilkunde*, B. xvii. H. v.-vi.) says: From December to March forty-four children were treated, and of these eleven died, a recovery of 75 per cent. Tracheotomy was performed upon thirteen, nine of whom recovered. No depression followed the use of the remedy. In a previous epidemic 70 per cent. recovered when treated by the ordinary methods. The author attributes the small death-rate to the mild course of the disease.

Still, Walker, Waylen, Caudwell, Eastes, White, Fowler, King, Morgan, Godfrey, Goodall, Barker, Biddle, Bride and Hughes: "The Antitoxine Treatment of Diphtheria." (*British Medical Journal*, 1894, ii., 180, 368, 439, 542, 655, 725 and 778.)

In all, thirty-three cases are reported with only two deaths. The injections were usually made between the scapulæ with a sterilized syringe, and varied in dose from five to twenty-two minims, according to the age of the patient. In no case was more than three injections given during the disease; and in the majority of the cases one or at most two doses were sufficient.

THE USE OF CHLOROFORM IN INFANTS.—Dr. Charon (*Jour. de Med. de Brux.*). A preference is expressed for chloroform for children of every age when operations are to be performed and for surgical exploration, especially if the child cries or struggles against the examination. Among the eight thousand cases in which the author has used chloroform, there have been but two deaths occurring with the first few inhalations of the anæsthetic. In the first case the child was under examination for vesical calculus, and the autopsy showed that there existed a cystitis with dilatation of the ureters and pyelonephritis. The second was during an operation for empyema in a child with a sudden attack of dyspnea. The autopsy revealed not only a purulent pleurisy upon the left side, but an extension of the seropurulent process to the pericardium. The further interesting statement is made that the younger the child the larger the amount of chloroform necessary to produce complete narcosis. The writer has used chloroform also for five years in the operation of tracheotomy for croupous laryngitis, but in this country the general use of O'Dwyer's tubes and the recent introduction of calomel fumigations, together with the very promising results from antitoxine injections, are fast doing away with the old operation of tracheotomy in this condition.—*American Medico-Surgical Bulletin.*

TREATMENT OF NEPHRITIS WITH PACKING AND EXTERNAL APPLICATION OF PILOCARPINE.—Dr. H. Mollière (*Wien. med. Presse*). The

author's method of treating nephritis consists first in embrocation of the entire trunk with an ointment of the following composition :

Pilocarpine nit. 5 to 10ctg. ($\frac{3}{4}$ -1 $\frac{1}{2}$ grn.)
White vaselin. 100grme. ($3\frac{1}{4}$ oz.)

Larger doses of pilocarpine produce disagreeable skin eruptions, which might necessitate interruption of the treatment. The body is then covered with a compact layer of cotton and a sheet of imperious material, and the whole fastened by bandages. The dressing is removed only when it has been completely soaked by perspiration, and it is then renewed after a few hours. The result of this treatment (with or without milk diet) was, as a rule, prompt cure in the acute cases, and a considerable improvement in the chronic ones, often extending over a number of years. There were at least fifty cases thus treated. The author attributed the advantage of this method to both the sudorific and the concomitant diuretic action of the pilocarpine. This action seems to be purely local, no trace of the alkaloid being found in the urine. The author regards his method specially beneficial during convalescence, when the milk diet is no longer tolerated, and the patient returns to his customary diet.—*American Medico-Surgical Bulletin.*

THE ANTITOXINE TREATMENT OF DIPHTHERIA. — Voswinkle (*Archives Kinderheilkunde*, B. xvii., H. v.-vi.) says : From the 20th of January to the 20th of March, sixty children with diphtheria were treated by the use of the Behring-Ehrlich antitoxine, injected hypodermically. They

were all patients at the Urban Hospital. The cases are divided into the mild, the moderately severe and the severe. Of the thirty severe cases, fifteen, or fifty per cent., recovered. There were fifteen classed as moderately severe, and of these thirteen recovered, eighty-one per cent. Fourteen were mild and all recovered. Eighteen cases were fatal out of the entire number, and forty-two, or seventy-five per cent., recovered. In this hospital in 1890, 55.7 per cent. of the cases of diphtheria recovered; in 1891, 55.6 per cent.; in 1892, 56.6 per cent.; in 1893, 51.7 per cent. In twenty, tracheotomy was performed, and nine recovered, forty-five per cent. The year previous, under ordinary treatment, twenty-six per cent. of the tracheotomy cases recovered. A marked improvement in the general condition follows the injection, although no particular change in the membrane could be made out. No unpleasant complication followed the use of the remedy. The author remarks that the earlier the treatment is begun, so much more favorable will be the result.

INFLAMMATION OF THE MIDDLE EAR OF INFANTS.—Hartmann and Kossel (*Deut. méd. Woch.*).—The authors give their results of investigations made in the Berlin Institute of Infectious Diseases: 1. *Post-mortem* examination and the examination of the ears of living children establish the fact that 75 per cent. suffer from inflammation of the middle ear. 2. Inflammation of the middle ear can nearly always be detected by an otoscopic examination. 3. The gen-

eral symptoms of otitis media are restlessness, elevated temperature and loss of weight. Sometimes these symptoms are not present. 4. Very often the symptoms of otitis media are connected with broncho-pneumonic processes. Probably both processes are due to the same cause—*aspiration*. 5. Death can result in cases of otitis media, from slow atrophy or from an extension of the micro-organisms into the cranial cavity or into the blood. 6. The inflammations of the middle ears of infants must receive treatment suitable for the varying conditions.—*American Medico-Surgical Bulletin.*

THE ANTITOXINE TREATMENT OF DIPHTHERIA. — Katz (*Archives Kinderheilkunde*, B.xvii., H.v.-vi.) says: One hundred and twenty-eight cases in all were treated. The diagnosis in each was confirmed by a bacteriological examination. Among the one hundred and twenty-eight cases, but seventeen were fatal, a death-rate of 13.2 per cent. In former years, under the old methods of treatment, it was about 37 per cent. The cases are divided into four groups, according to the severity: Forty-seven cases, mild, all recovered; thirty-five cases, moderately severe, one died; forty-two cases, severe, eleven died; four cases, septic, all died. A slight eruption on the skin resulted from the injection in six, and an abscess in one. A positive influence or effect upon the local process in the throat was not observed. The course in most of the cases was long and tedious. Following the injection there was, as a rule, a rapid reduction in the temperature.

OBSERVATIONS UPON DIPHTHERIA AND ITS ANTITOXINE. — Aronson (*Berlin Klin. Wochenschrift*, Nos. 15, 18, 19), in his experiments, endeavored to learn how the antitoxine affects the organism, and how it produces a therapeutic effect. Guinea-pigs were used in carrying on the work, and the results proved to the author's satisfaction that the diphtheritic poison is destroyed by the antitoxine. The method of obtaining the most efficient antitoxine is described in detail. Among one hundred children who were exposed to the disease and then inoculated but one was infected, and in this case an insufficient quantity of antitoxine had been used. The inoculation is made into the subcutaneous tissue of the chest or back. No unpleasant symptoms have ever followed an injection. The immunity is apparent by the first injection, and the durability upon the strength and efficiency of the antitoxine itself. This point is of great practical importance, and in long-continued epidemics, especially in small towns, reinoculation would be necessary every three or four months. In cases where the inoculations were made rather later, and we had to deal, not with diphtheria pure and simple, but a mixed infection, the statistics are not very favorable. Further investigations are necessary before conclusions can be arrived at.

Dr. T. S. K. Morton has reduced the treatment of *burns, scalds, and frost-bites* to a simple yet very effective method. Whether the patient is seen immediately following the injury, or after some other form of

treatment has been resorted to, the part is first immersed for several minutes in a 2 per cent. solution of carbolic acid; this being anæsthetic is well borne, is less irritating than mercuric chloride solution, and more effective if any oily substance has been previously applied. Blisters are pricked, the part is sprayed with a solution of hydrogen dioxide and covered with strips of Lister protective which have been moistened in the carbolic acid solution. Over that the usual sterilized gauze and bandage are applied. Acetanilid may be lightly dusted on under the protective, and sometimes seems to have a happy effect. The dressings are removed and fresh ones applied with the same regard to antiseptis, every other day.—*The Phil. delphia Polyclinic.*

STAINING MICRO-ORGANISMS IN THE BLOOD.—Vincint (*Gaz. Med. de Paris*) recommends the following method for staining micro-organisms in the blood. The cover-glass preparation is prepared in the usual manner, after which it is treated for 1 to 2 minutes in the appended solution: 5 per cent. carbolic acid 6 cc.; saturated salt solution 30 cc.; glycerine 30 cc.; the solution is to be filtered before using. This fluid dissolves the hæmaglobin, does not alter the shape of the red corpuscles and causes no precipitate. The fluid is drained off, the preparation washed in water, is counter-stained in carbol-methylene-blue plus $\frac{1}{2}$ per cent. aqueous methyl-violet solution. This method is mentioned as a good process for demonstrating the malarial plasmodia.

HYPODERMIC INJECTION OF SALT WATER IN PERNICIOUS ANÆMIA.—Dr. K. E. Lindén (*Finska Läkarsällskapets Handiingar*) records a case of pernicious anæmia where he employed subcutaneous injections of salt water with excellent results. Two injections in all were given, each containing 825 gms. of the following solution :

Cooking salt. . . . 4.0 ℥j.
 Bicarb. soda. . . . 3.0 grs. xlv.
 Distilled water. 1000.0 ℥ xxxj ℥ ij.

An improvement set in immediately after the first injection ; the sensation of obscuration of sight disappeared, the somnolence decreased, and the appetite increased. Immediately after the second one the pulse became stronger and fuller, as well as slower, the abnormal sensations of taste and smell vanished, and on the third day, after this second one, the appetite was decidedly ameliorated and the general condition greatly for the better. Three weeks after he was able to be about.—*Medical and Surgical Reporter*.

ANTISEPTIC EYE SALVES.—Dr. Bach (*Lo Sperimentale*) has experimented with a number of antiseptic eye-salves, especially those with vaseline as a base, and he finds them of undoubted value on account of their decided antiseptic action. Those of iodoform, boric acid and yellow precipitate are, however, without antiseptic properties. On the contrary, one of the bichloride, 1.3000, or the nitrate of silver, 2 per cent., will destroy the germs in a short time. These properties are not affected by mixing with other liquids as a solution of common

salt or tears, which is of great practical importance. Vaseline he has found to be a very poor soil for germs, for it will remain sterile for a long time and does not become rancid. Therefore, he advises heartily eye salves in preference to collyria, particularly where the patient is to apply them at home.—*Medical and Surgical Reporter*.

A CASE OF TRAUMATIC TETANUS WHICH RECOVERED UNDER ANTI-TOXINE INJECTIONS.—Herbert L. Evans (*British Medical Journal*, 1894, ii., 581) says: The patient was a boy aged thirteen years and eleven months. On June 8th he cut his knee on the road, leaving some of the road dust in the wound. On July 16th he experienced stiffness in the back and pain between the shoulders. He developed well-marked tetanus, and continued to grow worse, in spite of all treatment, until July 26th, when he was given a little chloroform and twelve ℞xx injections of Tizzoni's tetanus anti-toxine. He received three injections on July 30th, and two more on August 9th. The improvement was marked from the beginning of the treatment, and he made a rapid recovery.

IPECAC NOT AN OXYTOMIC.—Dr. A. Keilmann (*Petersburger Medicinische Wochenschrift*) has tried the tincture of ipecac as an oxytomic in weak uterine contractions, as recently recommended by Drapes and Utt, of St. Petersburg, and denies that it has any such powers. He would rather advise pushing the head from above down into the pelvis, but under anæsthesia.

THE CURE OF INEBRIETY.—The drunkard is curable in at least one-third of the cases. The basis of cure is forced and prolonged total abstinence, which should be instituted at once. Delirium tremens does not result from suddenly stopping the alcohol; its only results are headache, malaise and sweating. The treatment should be undertaken only where the patient may have calm surroundings and a military discipline; some drink, which will quench the patient's thirst and give him pleasure, should be substituted for the alcohol. Treatment should last at least for one year, and before it is terminated the force of the patient's resistance should be tried. When the treatment is concluded some moderate surveillance should still be exercised. If a certain trade or profession has been a causative factor it should be abandoned.—*Marandon de Momytel in Annal. Med. Psych.*

EFFERVESCENT MIXTURE OF QUININE.—(*The Practitioner*). It will frequently be found that, if prescribed in a liquid effervescent form, quinine will agree well with the stomach; and a small dose will produce as much effect as a much larger one in a solid form, whilst at the same time avoiding the possibility of irritation and tinnitus from larger doses. The following formulæ is recommended:

Quinine Sulph.	2 grn. (13 ctg.)
Citric Acid...	10 grn. (65 ctg.)
Simple Elixir.	½ fl.dr. (2 c.c.)
Syrup Orange.	½ fl.dr. (2 c.c.)

For one dose, to be taken with 10 grains of sodium bicarbonate, dissolved in a wineglassful of water.

DOUBLE SUPPURATIVE ORCHITIS, CAUSING PERITONITIS AND DEATH.—Hornus (*Centralblatt für Chirurgie*) reports a very unusual case in which a soldier without having received an injury, without gonorrhœa, mumps or any other preceding disease, was suddenly attacked by an acute double suppurative epididymitis and orchitis, which spread up the spermatic cord to the peritoneal cavity. Suppurative peritonitis followed with death in five days from the onset of the trouble. At the autopsy the testicular substance was found to be replaced by pus. It should be mentioned that at the time there were some cases of mumps in the same barracks.

EYE-STRAIN A CAUSE OF NOCTURNAL ENURESIS.—Dr. George M. Gould reports a number of cases of children who were afflicted with nocturnal enuresis, that were cured by correction of the ocular defect by glasses. In most of the children the involuntary urination was accompanied by many other nervous symptoms, such as night terrors, headaches, chorea, etc., nearly all of which were also relieved or cured by glasses that corrected the visual anomaly. Some of the patients had undergone operations and treatment that had extended over years without relief of the trouble.—*Med. News.*

STATE MANUFACTURE OF ANTI-TOXINE.—Senator Wolf has introduced a bill in the New York Senate, providing for the manufacture of diphtheria antitoxine and other antitoxines in New York City, and for the sale of the same, and for the creation of an antitoxine fund.

COD-LIVER OIL IN HYPOSTHENIA.
 —Dr. T. Robinson (*Sem. méd.*). Cod-liver oil in small doses is said by the author to constitute an excellent means of treating a peculiar state of debility frequently met with in practice, and characterized by the following symptoms: Coldness of the extremities, physical and mental depression, cephalalgia, nervous irritability, atony of the digestive functions (and of the menstrual function in women), and a subnormal temperature. He administers it according to the following formulæ:

Malt extract.....	45 gme.
Pancreatinized cod-liver oil	30 gme.
Spirit chloroform.....	4 gme.
Oil cinnamon.....	6 drops.
Water	100 gme.

Three tablespoonfuls daily, after meals.—*American Medico-Surgical Bulletin.*

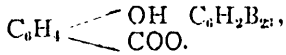
REASONS WHY THE ABDOMINAL BANDAGE SHOULD NOT BE USED AFTER LABOR.—(*Southern Medical Record.*) (1) It is unnatural. (2) It is liable to become soiled, and hence a harbor for microbes. (3) It increases irritation of the tired and overworked abdominal organs. (4) It interferes with the necessity of frequent antiseptic ablutions. (5) It is difficult to keep in place, unless made to order. (6) It binds down the weak uterus and promotes the return of a displacement or a subinvolution. (7) It predisposes to puerperal and cerebro-spinal centres. (8) It increases rather than diminishes the danger of post-partum hæmorrhage. (9) It prevents digestion, assimilation

and intestinal peristalsis, and tends to bladder trouble. (10) It is unsafe to apply it by anyone except the accoucheur or an experienced nurse.—*The College and Clinical Record.*

CANCER A LOCAL DISEASE.—The evidence for this doctrine has been strongly presented by Dr. Jennings, in his work on "Cancer and Its Complications," the second edition of which has been recently published in London. If cancer be a local disease, it is imperative that not only those tissues which are seen to be subjected to cancerous infiltration, but some of the surrounding tissues and the neighboring lymphatic glands should be taken away by means of the knife at as early a date as possible. The amount of personal observation given in support of this method of treatment is not very great, but the careful analysis of the work and opinions of others and the comparison of the methods of termination of the disease under different methods of treatment amply warrant Dr. Jennings in drawing very wide and general conclusions.—*British Medical Journal.*

PHOTOGRAPHING THE WOMB.—A Swiss physician has described a method of dilating the uterus by means of tents, so that by the use of a mirror a perfect view may be obtained of the interior of the organ. Not content with this, however, he is unselfish enough to desire to obtain photographs of the uterine interior in various diseases of the organ. The future of woman is sad indeed if now her womb must not only be felt of, sounded and measured, but photographed as well.—*N. Y. Polyclinic.*

TRIBROMSALOL AN INTESTINAL ANTISEPTIC.—Dr. Hueppe (*Pharm. Centralbl.*). The author divides the intestinal antiseptics into two groups: Such as are soluble only in alkaline liquids (f.i., tribromphenol), and such as are first fractionated by the intestinal liquids, before dissolving and exerting their action (f.i., salol). Tribromsalol,



belongs to both groups. It is dissociated by feeble alkalies (f.i., 0.25 per cent. soda solution), even without the co-operation of the pancreatic juice. In passing through the human body it is decomposed chiefly into tribromphenol and salicylic acid. It is relatively innocuous; a rabbit weighing 2 kilos (4 2-5 lbs. av.) bore 15 grammes ($\frac{1}{2}$ oz.) perfectly well. Therapeutic data are wanting.—*American Medico-Surgical Bulletin.*

THYROID IN OBESITY.—The rapid loss of body-weight attending the treatment of myxœdema with thyroid very naturally suggests the applicability of the same method in obesity. Doctors Charrin, Leichtenstern and Wendelstadt observed a manifest diminution of *embonpoint* in twenty-two of twenty-five obese subjects after a course with fresh sheep-thyroids. The good effects are ascribed to more active combustion of accumulated fat, rather than to the diuresis which is so marked a feature of the initial stage of treatment. The actual wasting observed varied in individual cases from one to five kilogrammes during the first week, and from one to nine in the subsequent weeks.

PETROLEUM IN PULMONARY TUBERCULOSIS.—Dr. Pellisier (*Bulletin Général de Therapeutique*) observing that workmen about oil wells are rarely affected with consumption, tried the filtrated crude oil in treating this disease. It was given in capsules and inhalations of its vapor used at the same time. The results, he claims, were astonishing; the cough and sweats disappeared, the appetite and sleep became normal and the affected portions of the lung healed. Attempts to give it in clysters failed from its slight absorption.

DON'T WANT NEW BLOOD.—A Society for Experienced Practitioners Only.—The Quarter-Century Medical Club, for social, biographical and historical purposes, was organized in Detroit, Mich., January 15th. The qualifications for membership are twenty-five years' practice in Detroit and good standing in the profession. The following officers were elected: President, Peter Klein, M.D.; Vice-President, E. W. Jenks; Treasurer, Hamilton E. Smith; Secretary, J. J. Mulheron.

A PILL FOR ANÆMIA.—Professor Edlefsen (*La Semaine Medicale*) recommends the following:

℞ Iron by hydrogen, } aa ʒjss.
Powdered camphor, }
Extract gentian . . . grs. cxxxv.
Mucilage gum Arabic q. s.

Make ninety pills. Dose: Two or three thrice daily.

These are of value both in anæmia and in chlorosis, especially when accompanied by cardiac disturbances, such as weakness and irregularity of the pulse.—*Medical Age.*

A TREATMENT FOR ACNE OF THE FACE.—In an abstract from the *Bulletin General de Therapeutique*, which appears in *Lyon Medical*, the writer gives the following formula which, he says, has often been employed at Saint Louis with success: Fresh lard, 750 grains; sublimed sulphur, 105 grains; beta-naphthol and styrax ointment, each, 30 grains. Applications of this mixture should be made with strong friction every night for a week, then interrupted for six days, when they may be repeated, if necessary, although it is often useless to do so. If there is an appearance of small acute clusters, which generally show themselves toward the second day, the acne is ordinarily cured or very much ameliorated at the end of a week.—*Medical and Surgical Reporter*.

THE ANTITOXINE TREATMENT OF DIPHTHERIA.—Schubert (*Archiv für Kinderheilkunde*, B. xvii., H. v.-vi.) says that in the Elizabeth Hospital, at Berlin, from the 5th February to the 4th May, thirty-four children were treated with the antitoxine. In thirty of these tracheotomy was performed; twenty-eight recovered; all were treated with the antitoxine regardless of the severity. Following the injection, the local process in the mouth, nose and throat improved rapidly. More striking still was the improvement in the general condition and the heart. Unpleasant results never occurred. A slight eruption on the skin developed in six, and was accompanied by a slight rise in the temperature. Hæmorrhagic nephritis was a complication in two. The injections were made into the thigh.

CALOMEL PLASTER IN CONGENITAL SYPHILIS.—In the following preparation the sodiurn chloride and alkaline salts of the sweat transform the insoluble subchloride to the soluble perchloride which is absorbed and keeps up a continuous action:

Calomel	10 parts
Castor oil	3 "
Diachylon plaster	30 "

Four square inches of this plaster ought to contain about eighteen grains of calomel. A piece about six inches long and four broad is applied, after thoroughly cleansing the skin, and is renewed weekly.—*Brit. Med. Journal*.

COLD BATHING DURING MENSTRUATION.—Cold bathing during menstruation is a beneficial measure, provided women accustom themselves to the treatment by bathing every day for at least eight days before the arrival of the period, when they can continue during the menstrual flow without any danger. In the case of a very anæmic girl, in whom this treatment was instituted, it gave most satisfactory results. Houzel, before the recent Boulogne Congress, held that cold salt-water baths facilitate the menstrual flow, increase the duration of genital life, and likewise increase fecundity in a remarkable manner.—*Dr. Depasse, in Gazette de Gynæcologie*.

ENLARGED GLANDS.—

℞ Iodoformi	} āā ʒi.
Bals. Peru	
Collodii	ʒi.

—M.

Fig. : To be painted over swellings every night.

A PTOMAIN IN THE URINE IN A CASE OF CARCINOMA OF THE UTERUS.—At a recent meeting of the French Academie des Sciences Griffiths (*La Presse Medicale*) described a ptomain that he had succeeded in extracting from the urine of a woman affected with carcinoma of the uterus. The body appears as a white substance, crystallizing in small needles, soluble in water and of alkaline reaction. It forms a chlorplatinate, a chloraurate, and a chlorhydrate, and gives rise to a yellowish precipitate with phosphortungstic acid, a brownish precipitate with phosphormolybdic acid, and with mercuric chlorid, and a reddish precipitate with argentic nitrate. Analysis shows its formula to be $C_8H_7NO_3$. It possesses toxic properties, and is not found in the urine of healthy persons.—*Medical News*.

BLACK EYE.—There is nothing to compare with the tincture or strong infusion of capsicum annum mixed with an equal bulk of mucilage or gum arabic, and with the addition of a few drops of glycerine. This should be painted all over the bruised surface with a camel's-hair pencil and allowed to dry on, a second or third coating being applied as soon as the first is dry. If done as soon as the injury is inflicted, this treatment will invariably prevent blackening of the bruised tissue. The same remedy has no equal in rheumatic sore or stiff neck.—*Ex.*

Prof. Wilson says that neuralgia of the fifth pair of nerves and intercostal neuralgia will often be found to follow an attack of influenza.

"CHELSEA PENSIONER."—Lord Anson paid three hundred pounds for the privilege of publishing the following prescription for chronic rheumatic arthritis:

Sulphur	ʒ i.
Cream of tartar	ʒ i.
Rhubarb	ʒ iv.
Gum guaiac	ʒ i.
Make one powder and add honey	ʒ xvi.

Mix well, take two tablespoonfuls in a tumbler of white wine and hot water on going to bed, and repeating the dose on getting up in the morning.—*Louisville Medical Monthly*.

PIGMENTATION IN AMENORRHOEA.—Lawrence (*Bristol Medico-Chirurgical Journal*) reports the case of a girl suffering from amenorrhoea with pigmentation. This became so marked as to suggest Addison's disease. She was treated with wine of iron, one drachm, and Fowler's solution of arsenic twice daily, burgundy in moderation, careful diet, the addition of milk, and her life regulated in accordance with general hygienic principles. This resulted in complete cure after many months.—*Medical and Surgical Journal*.

FOR AMENORRHOEA.—The following (*Pract.*) promises well:

℞ Hydrargyri chloridi corrosi	gr. ʒ/4.
Sodii arseniatis	gr. j.
Ferri sulphatis exsic- catæ	gr. xxx.
Potassii carbonatis	gr. xv.
℞. nucis vomicæ	gr. v.

M.—Divid. in pil. xxx. Sig.: One pill to be taken before each meal.

A METHOD OF TREATING COLIC IN NURSING INFANTS.—According to Dr. Th. Escherich, Professor Extraordinary of Pediatrics at the Medical Faculty of Gratz, one of the best methods of treatment of intestinal colic, which is of such frequent occurrence in nursing infants, consists in the administration of calomel in doses of five milligrammes (one-tenth grain) thrice daily, and simultaneously employing the following potion :

℞ Peppermint water
Fennel water ʒj
Distilled water
Cherry-laurel water. gtt. xv
Laudanum gtt. j
Simple syrup ʒiiss

Mix.—To take a teaspoonful every two hours.

—*North American Practitioner.*

CHLORAL HYDRATE FOR HÆMOPTYSIS.—Having in view the reduction of the pressure in the pulmonary circulation, Pal (*Centralbl. für die gesammte Therapie*) employed chloral hydrate in doses of from 15 to 37.5 grains by enema in the treatment of the hæmoptysis of pulmonary tuberculosis, selecting young adults with healthy hearts. In some cases the hæmorrhage would cease or diminish in from half to three-quarters of an hour, sometimes recurring after a varying interval. In a number of instances the administration of the drug was repeated, sometimes in a prophylactic way, even after the hæmorrhage had ceased. Morphin and codein may be expected to act with correspondingly good results,

and morphin has the additional advantage of subduing cough.—*Medical News.*

CLINICAL RESEARCHES UPON THE DIAGNOSTIC VALUE OF INCREASED INDICAN EXCRETION IN SUPPURATION.—W. Beckman (*St. Petersburg Med. Woch.*) says: "In the various pathological conditions no other source of increased indican formation except the intestine has, as yet, been positively determined. Between suppuration and indicanuria there exists no causal connection. Increased indican excretion can in no instance be depended upon as evidence of a concealed suppurative focus."

MENORRHAGIC CHLOROSIS.—Dr. Ch. Ligeois prescribes :

℞ Sulphate of iron gr. xxxviii.
Ex. of hyoscyamus. gr. xv.
Alcoholic extract of
 hydras. canadensis gr. lxxviii.
Powdered licorice
 root gr. lxxviii.

Make 100 pills. Sig. : Two at each meal, both during and between the menstrual periods.

GERMS CANNOT BE SENT BY MAIL.—Bacteriologists and pathologists should take notice that by the new postal regulations, "disease germs and matters from diseased persons" are unmailable matter, and cannot in the United States be sent by post.

In cases of abortion, Prof. Parvin says, after all the membrane has been removed, the uterine cavity should be swabbed out with iodine, it being an excellent antiseptic and hæmostatic.

DIABETES MELLITUS.—In order to relieve the dryness of mouth, which is often so troublesome, the nitrate of pilocarpine— $\frac{1}{8}$ grain—made up with a sufficient quantity of glycerin and gum to form a small pill, may often be used with advantage. From five to seven pills are taken during the day, being allowed to dissolve slowly in the mouth. It may be applied in solution, if preferred :—

R Nitrate of pilocarpine. . . gr. $\frac{3}{4}$.
 Alcohol of 40 degrees . . . mxc.
 Distilled water. ʒij.
 M.

The tongue is moistened with five or six drops of this mixture, either pure or diluted with $\frac{1}{2}$ drachm of water. The application may be repeated four or five times during the day.—*Medical and Surgical Reporter*.

ANOTHER CONSUMPTIVES' HOME.
 —Mr. J. H. Schiff and Mr. L. G. Bloomingdale have each given \$25,000 for the establishment of a country home for consumptives. The new establishment will be called the Montefiore Country Home for Consumptives. It will be non-sectarian and entirely devoted to the poor.

Prof. Wilson says that in cases of typhus fever, the eruption is more often absent in those under fifteen than above this age, and that in children the true petechiæ very rarely appear.

In patients who abort regularly, and generally before the fourth month, Prof. Parvin says if they pass the fourth month successfully they will generally go to term.

A SIGN OF BREECH PRESENTATION.—In *La Clinique Internal* Pinard asserts that when, in a woman who has passed the sixth month of pregnancy, a sharp pain is produced by placing the hand on the fundus uteri, it may be almost affirmed that there is a breech presentation. The fact is very frequent, although not constant, being present in about seventy per cent. of cases. The pain is sometimes spontaneous, and if version is performed it disappears. Pinard claims that the pain is due to the "irregular distention produced by the rounded mass of the head," but he does not explain how an irregular distention can be produced by a rounded mass.

In cases where there is pain at the time of micturition, whenever the urine is found to be high colored and cloudy, Prof. Hare says the citrate of potassium in combination with sweet spirits of nitre should be given, well diluted with water, three times a day; of the first he gives twenty grains and of the latter thirty drops.

Prof. Wilson says the urea in cases of typhus fever, during the early days of convalescence, falls below the physiological standard, even though the patient partakes of a very liberal diet, but as he improves in health so is the amount of urea increased.

Prof. Hare says aconite, as far as is known, is the only drug which in poisonous doses will cause numbness of, and tickling of, the first of the mucous membranes with which it comes in contact, and then of the extremities.

Legislation.

AN ACT RESPECTING MEDICAL TARIFFS.

Her Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Ontario, enacts as follows:

1. Section 16 of "The Ontario Medical Act" is repealed.

AN ACT TO MAKE FURTHER PROVISION FOR THE PUBLIC HEALTH.

The text of this Act appeared in our April number, excepting the last section, which is as follows:

5. Section 61 of the said Act is amended by inserting the following words after the word "district" in the fourth line: "affected thereby, may institute an inspection, and when necessary."

AN ACT TO AMEND THE PHARMACY ACT.

Her Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Ontario, enacts as follows:

1. Section 35 of "The Pharmacy Act," as enacted by Chapter 28 of the Acts passed in the 56th year of Her Majesty's reign, and amended by the Act, chapter 45, of the Acts passed in the 57th year of Her Majesty's reign is repealed.

2. Nothing in "The Pharmacy Act" contained shall extend to or interfere with or affect the making or dealing

in any patent or proprietary medicines.

Provided always that in case of there being reason to apprehend that any such medicine contains any poison mentioned in the schedules to the said Act that renders its use in the doses prescribed dangerous to health or life, the Provincial Board of Health may cause to be made an analysis of such medicine by an analyst or other competent person appointed by the Lieut.-Governor-in-Council; and if on such analysis it appears that such patent or proprietary medicine does contain any of the said poisons to an extent rendering its use in the doses prescribed dangerous to health or life, the said Board may give notice thereof to the manufacturer or proprietor of such patent or proprietary medicine, or to his agent or representative in this Province of the result of such analysis, and in that case shall name a convenient time and place at which the manufacturer or proprietor may be heard before said Board in opposition thereto. If the Board is of the opinion that the said patent or proprietary medicine is in the doses prescribed dangerous as aforesaid, the Board shall afterwards report their opinion to the Lieut.-Governor-in-Council, and the report shall be subject to appeal to the Lieut.-Governor-in-Council. The Board shall submit to the Lieut.-Governor-in-Council the report of the analyst, and the objections, if any, made to the same by the manufacturer or proprietor, together with the report of the Board thereon, and if the Lieut.-Governor-in-Council approves of the report, notice thereof may be given in the *Ontario Gazette*, and after such

notice in the *Ontario Gazette*, the provisions of the said Act with regard to poisons shall apply to such patent or proprietary medicines whether sold by persons registered in pursuance of the said Act, or by others.

AN ACT TO AMEND THE ACT RESPECTING CEMETERY COMPANIES.

Her Majesty, by and with the advice and consent of the Legislative Assembly of the Province of Ontario, enacts as follows :

1. Section 16 of "The Act respecting Cemetery Companies," being chapter 175 of the Revised Statutes of Ontario, is amended by adding thereto the following sub-section :

(2) The company may, out of any moneys received by virtue of this Act, repurchase any lot or lots previously sold or conveyed by the company, and take conveyances of the same from the owners thereof, and may also, from time to time, resell the same in the manner and form provided respecting other lands in the cemetery held by the company.

2. Section 11 of the said Act is amended by adding thereto the following sub-section :

(2) No grave in a cemetery shall be reopened for the purpose of removing a body therefrom, nor any monument or other permanent improvement placed on a lot be removed from such lot, without the consent of the directors of the company, or an order of the county court judge in that behalf ; but saving, nevertheless, the right of the Crown to order the

removal of a body for the purposes of legal inquiry.

3. Section 19 of the said Act is amended by adding thereto the following as sub-section 1A :—

(1A) Every such company mentioned in this section may also take and hold by gift, assignment or devise from owners thereof any lot or lots in the cemetery of such company, for the purpose of maintaining the same in perpetuity or otherwise, in the manner and subject to the provisions mentioned in the instrument of such gift, assignment or devise.

4. Section 27 of the said Act is repealed and the following substituted therefor :

(27) The directors may pass by-laws for the laying out, selling and managing of the ground, for the regulating of burials to be made therein, the removal of bodies therefrom, the erection or removal of tombs, monuments, grave-stones, vaults, copings, fences, hedges or other permanent improvements therein, the planting, placing and removal of trees, shrubs and plants in the grounds, and otherwise generally respecting the use of the grounds by the shareholders and the public ; and for empowering the president and secretary to execute conveyances of plots in the cemetery.

ASSYRIAN RECORDS.—Layard, in his "History of Nineveh," mentions that the national records of the Assyrian Empire were written on bricks in characters so minute as to be scarcely legible without the aid of a microscope, and that, in fact, a variety of this instrument was found among the excavations.—*Ex.*

Dominion Medical Monthly.

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TORONTO, MAY, 1895.

GREAT CRY AND LITTLE WOOL.

The Haycock bill having been unceremoniously pitchforked out of the Legislature, consent was given, by a new Act, to the amendment of section 16, Ontario Medical Act.

This section provided that a tariff of professional fees could be adopted by a divisional Medical Association and when approved by the Medical Council, this tariff was held to be a scale of reasonable charges for medical services rendered in the division where the member making the charges resides.

This section being now repealed, a physician may charge such fees as he thinks proper. If he is obliged to collect an account by a suit at law, the court will decide whether the charges are excessive or not. In

certain cases this may necessitate the appearance of one or two physicians in the witness box, in order to enlighten the court as to the question at issue.

THE PUBLIC HEALTH ACT OF 1895.

An amendment to this Act provides that in towns having a population of over four thousand, the local Board of Health shall consist of the mayor and six members, instead of eight as heretofore. The members of a township or village board of health whose appointments used to be made *annually* by the Council, are now to be appointed as follows: One member to be appointed for three years, one member for two years, and one member for one year, each member retiring to be replaced by a member appointed for three years. In towns having over four thousand population two members are appointed for three years, two for two years, and two for one year, the retiring members to be replaced by two members appointed for three years.

The operation of these clauses will probably bring about the presence on local boards of health of individuals who take a real and an abiding interest in hygiene, and who, being allowed to have a certain continuity of office, will accomplish some effective sanitary work previous to their retirement.

In controlling the establishment of public water supplies, a notable addition is made to the powers possessed by the Provincial Board of Health. Heretofore the powers of that Board in this behalf have been advisory; in future it will not be possible for a

municipality to establish public water-works without first obtaining the Board's approval of the plans, etc.

The approval of the Board will also be required previous to the construction of a sewer, system of sewerage, or method for the disposal of sewage, and no change in the construction of sewers or in the disposal of sewage therefrom, liable to injuriously affect the public health, shall be made without the Board's consent. Appeals may be carried to the Lieutenant-Governor in Council against the ruling of the Provincial Board in these matters.

Powers are also given to a health officer to prevent blood, offal, etc., from being fed to hogs.

An important amendment is made to section 61 of the Health Act. It interests municipalities and individuals who may be injured through nuisances caused wholly or in part by some act or default committed, or which has taken place in another municipality or district. The amendment provides that the municipality or district affected by the nuisance may institute an inspection without being guilty of trespass.

AMENDMENT TO THE PHARMACY ACT.

The amendment to the Pharmacy Act, which we print at page 143, is important.

The making or dealing in any patent or proprietary medicines is not affected or interfered with. Provision is made, however, by which certain medicines of evil repute—"female regulators," "specific monthly

medicines," and others of a similar class—may be dealt with by the Provincial Board of Health. Some of these medicines are advertised in italics as "successfully used monthly by thousands of ladies." This certainly means that they are represented to be abortifacients, and may be therefore dangerous to health and life. They should be submitted to analysis and their true character revealed.

The unregulated use of morphine in cough medicines demands investigation. We understand from a druggist that a certain popular cough syrup containing morphine is used by some of his customers for a very considerable time. This is certainly a practice not conducive to health.

Headache powders containing antipyrine and phenacetine are also extensively and regularly used by the public without consulting physicians. This is also reprehensible.

The amendment is a short step in the right direction. Should the results of the analyses reveal the necessity for scheduling important patent or proprietary remedies in the interest of the public health, further legislation may be required.

EXHUMATION OF CORPSES OF DIPHTHERIA PATIENTS.

In an editorial which appeared in this journal last July, we censured the practice of exhuming the corpses of persons who had died from contagious diseases, and commended the action of the Toronto General Burying Grounds Trust, who in May, 1894, passed a regulation which reads: "Bodies of persons dying of con-

tagious diseases shall not be placed in a vault, but must be interred, and shall not be disinterred."

It may be that in putting such a regulation in force last May, the trustees were exercising an authority which they did not then possess. Their action was, however, well grounded, and we are pleased to see that in an "Act to amend the Act respecting Cemetery Companies," passed last month by the Ontario Legislature, this power of making regulations against exhumation is granted to the directors of cemeteries.

Provision is also made that no grave in a cemetery shall be reopened for the purpose of removing a body therefrom without the consent of the directors of the company, or an order of the County Court Judge in that behalf; but saving, nevertheless, the right of the Crown to order the removal of a body for the purpose of legal inquiry.

This last section would commend itself to the favorable judgment of sanitarians, if the right to order the exhumation of a corpse were exclusively reserved to the Crown.

A NEW CREMATOR.

The following is a short description of a very ingeniously contrived cremating furnace, made by Messrs. W. F. Mason (Limited), sanitary engineers, Manchester. Some few years ago the Laboratories Committee of the Con-joint Board of the Royal Colleges of Physicians (London) and Surgeons (England) were confronted with the somewhat difficult task of disposing of the cultures, refuse, etc., from their laboratories. Dr. Woodhead, the director, and other gentlemen, were

deputed to make inquiries, and to examine any apparatus that appeared suitable for destroying such material. We understand that these gentlemen examined the destructors in use in similar institutions on the Continent, and in one or two of the hospitals in this country. Not feeling satisfied with the results of these investigations, Dr. Woodhead entered into correspondence with Messrs. W. F. Mason, and explained to them his requirements; and, as the result of several interviews, this firm invented a cremating furnace, having the following features: It is a cleanly-looking structure, faced with white glazed bricks. It is about 6 feet wide, 8 feet long, and 8 feet high. At the base of the structure is a coke furnace, which is regularly supplied with a small stream of water, by means of which an intense heat is obtained in the combustion chamber. This is aided by an ingenious arrangement, whereby a given quantity of rarefied air is admitted, which, mixing with the gases from the water and coke, raises the temperature to an intense white heat. In the centre of the combustion chamber is placed the cremating chamber, which is really a large crucible, access to which is obtained through a 'door placed' immediately above the furnace door in the front of the structure. From the cremating chamber a flue runs into the combustion chamber at its base, so that all gases from the cremating chamber pass through the coke, heated to an intense white heat as above mentioned, before they reach the chimney. It may be mentioned, too, that these gases are mixed with hot air in the mixing chamber before they gain access to the combustion

furnace, so that all gases from the cremator during combustion are thoroughly purified and deodorised before they reach the chimney, and thus emerge into the atmosphere. The cremator has already been at work for about three years, and continues to give entire satisfaction. The management of the Brompton Hospital for Consumption have now adopted the system, and we understand that several other hospitals are likely to fit up one of these cremators in the near future.

REGULATING THE SALE OF PATENT MEDICINES.—A bill has been introduced into the New York State Legislature giving the Board of Health power to regulate the sale of all patent medicines. This is a wise measure, and one that would promote the public good.

INFLUENZA is very prevalent in England. Forty members of Parliament, and fifty members of the staff, and one-third of the employees of the Bank of England, are down with it.

Book Notices.

A System of Surgery. By AMERICAN authors. Edited by FREDERIC S. DENNIS, M.D., Professor of the Principles and Practice of Surgery, Bellevue Hospital Medical College, New York; President of the American Surgical Association, etc., assisted by JOHN S. BILLINGS, M.D., LL.D., D.C.L., Deputy Surgeon-General, U.S.A. To be completed in four imperial octavo vols., containing about 900 pages, each with index. Profusely illustrated with figures in colors

and in black. Vol. I., 870 pages, 422 engravings, and two colored plates. Price per vol.: \$6.00 in cloth, \$7.00 in leather, \$8.50 in half morocco, gilt back and top. Full circular free to any address on application to the publishers, Lea Brothers & Co., Philadelphia; or to Messrs. McAinsh & Kilgour, Confederation Life Building, Toronto, Canadian agents.

The title of the first "System of Surgery," written distinctively by American authors, will raise high anticipations of merit, and this presumption, at once favorable and critical, will find confirmation in the names of editors and contributors. As the foremost men in any profession are always the busiest, success in securing an expression of their knowledge indicates in this instance an appreciation of the prestige to be derived from joint authorship in a work planned on lines certain to gain for it an enormous circle of readers.

The profession is greatly enriched by the fortunate circumstances which thus place at its command a complete exposition of modern surgery bearing the credentials of unquestioned authority. The eminent position conceded to American surgeons throughout the world makes a representative work a debt due to the dignity of the country, and in point of time it is a necessity, owing to the vast progress witnessed by recent years. Science is, however, not bounded by geographical lines, and the material now presented is international in the sense of containing the most advanced surgical knowledge of the globe.

For the execution of such a purpose the facilities existing on this

side of the Atlantic are unsurpassed. European literature is readily accessible in all our medical centres, and our distance from its source gives the advantage of perspective and impartiality in estimating its value. The peculiarities of surgical practice in America are no less marked than those of medicine, and in either case actual experience with the personal and climatic conditions of the people is a prerequisite to an understanding of their needs.

The pages of the present volume indicate that careful study has been bestowed in planning the work so as to impress upon it a maximum of usefulness. Every surgical topic concerning which information could be desired, will be found in its proper place, a result secured by a comprehensive system of indexing extant surgical literature prior to the preparation of the MS. In the method of dealing with the vast aggregate of subjects thus collected, a rational arrangement and a clear and concise style find room for a whole library of encyclopædic surgical information in four convenient volumes. Nothing is neglected in the domain of practical surgery, the words being construed in the most liberal sense to include surgical pathology, the question of operating, the choice of the best procedures, the details requiring attention, the complications which may arise, the preparation and subsequent care of the patient, etc., etc. Antiseptic and aseptic surgery, the keystones of modern success, are represented in full detail and according to the most approved methods. Due attention has likewise been paid to the medical treatment required in

surgical affections. In the make-up of the book, the rich series of illustrations and the colored plates are worthy of note. Among the professions, that of medicine can certainly claim pre-eminence in its technical literature. In the other practical sciences it would be difficult to point out a comprehensive work written by the foremost men and issued with every advantage of type and illustration at a price within the command of all.

List of contributors: Drs. Robert Abbe, Gorman Bacon, Herman M. Biggs, John S. Billings, Wm. T. Bull, William H. Carmalt, Henry C. Coe, Phineas S. Conner, Wm. T. Councilman, D. Bryson Delavan, Frederic S. Dennis, Edward K. Dunham, Wm. H. Forwood, Geo. R. Fowler, Frederick H. Gerrish, Arpad G. Gerster, Virgil P. Gibney, William A. Hardaway, Frank T. Hartley, Jos. T. Johnson, Wm. W. Keen, Wm. T. Lusk, Chas. McBurney, Rudolph Matas, Henry H. Mudd, Chas. B. Nancrede, Hy. D. Noyes, Roswell Park, Willard Parker, Lewis S. Pilcher, Wm. M. Polk, Chas. B. Porter, M. H. Richardson, John B. Roberts, G. E. DeSchweinitz, Nicholas Senn, Stephen Smith, Lewis A. Stimson, Robt. W. Taylor, Louis L. McL. Tiffany, J. Collins Warren, Hy. R. Wharton, Robt. F. Weir, Wm. H. Welch, J. Wm. White, H. C. Wood.

A System of Legal Medicine. By Allan McLane Hamilton, M.D. The work is comprised in two large royal octavo volumes, of 700 pages each, illustrated. In cloth, \$5.50; sheep, \$6.50. Sold by subscription. Orders taken only for the complete work. E. B. Treat, New York, Publisher.

The list of contributors to this great work includes the names of thirty of the most distinguished writers and authorities upon medical jurisprudence in America, with upwards of five thousand citations and cases. As a book of reference it will be found an invaluable help to medical men and to those of the legal profession who desire the aid of the most advanced and sound opinions of practical students of forensic medicine. So much opprobrium has been attached to the word "expert" that the spirit which so often impels men to go into court and become ardent partisans finds no place in this system, and it has been the aim of the editor and his colleagues to give the work a decided judicial and impartial tone, so that it may be consulted with confidence by all as an authority of the first order.

Until recently the contributions in the United States to the literature of medical jurisprudence have been exceedingly meagre, if we may accept Beck's classical but antiquated treatise, and other works limited in scope. From necessity it has been the custom to consult foreign books, which were written for the benefit of transatlantic readers, and are in many respects inapplicable to our methods, and not in conformity with the legal usages of this country. We therefore believe that the appearance of an American treatise of this character will be especially timely and welcome.

A feature of the book is the introduction of short articles upon special subjects, prepared by distinguished members of the American bar, which form appendices to the different articles.

The legal gentlemen who have

been invited to write articles upon subjects with which they are especially familiar have in most instances acted in conjunction with a medical collaborator.

The editor has aimed to make the work under consideration a repository of the most advanced ideas and valuable cases, and, except when the latter are unique, indispensable, or especially pertinent, it has been his aim and that of his associates to avoid threadbare material, and to illustrate the articles by new examples. The scope of the work is necessarily very great, but it is trusted that its contents will be found to be practical and concise. Extraneous matter is dispensed with, and the reader is spared dry and uninteresting details and a repetition of valueless decisions. A feature of Hamilton's "System of Legal Medicine" is the presentation of a large amount of new experimental research by contributors who have actually figured repeatedly in notable cases in civil, criminal and probate courts in various parts of the country.

Medical Gynecology. Being a treatise on the diseases of women from the standpoint of the physician, by that well-known teacher and lecturer, ALEXANDER J. C. SKENE, M.D. This is a work such as we would expect from such an author. Dr. Skene stands deservedly high in his specialty, and it is not surprising, with his experience as a teacher, that he should place all the points of his subject before his readers in such a thoroughly intelligible and simple form.

This work completely covers the whole field, and any physician wishing

to quickly make himself *au fait* with all that is most recent and tried on any point of practice in connection with this subject could not do better than possess himself of this book. It is a work of some 525 pages, issued by the D. Appleton Company of New York, whose name is a guarantee of its excellence. Canadian branch under charge of Mr. Morang, Traders Bank Building, Toronto.

Diet Lists and Sick-room Dietary.
Compiled by JEROME B. FLOWERS,
A.B., M.D.

This is one of the many handy books published by W. B. Saunders. The Lists are detachable, and include every disease in which the dietary forms an important part of the treatment. Knowing the difficulties in the way of the physician in getting patients to follow directions in this matter, we strongly recommend them to obtain one of these books, and in future hand the printed directions to the nurse, thus avoiding all chance of error.

Surgical Asepsis. One of the most valuable of the books in Saunders' new Aid Series of Manuals has just come to hand. This is "Surgical Asepsis," by CARL BECK, M.D. In an era in medicine which has as its special feature the aseptic conduct of surgical cases, it is a pleasure to have in so concise a form all that is most modern in teaching. The author has had the best experience in the largest hospitals of New York, and places before his readers all that is most valuable and thoroughly practical on this subject in a manner that must appeal to the busy practitioner.

Personal Items.

UNIVERSITY MEDICAL GRADUATES.—Following is the list of young men who became doctors of medicine by decree of the University Senate last week: W. L. T. Addison, A. W. Aiken, S. B. Bean, H. Delahey, W. Douglas, jr., A. S. Elliott, G. W. Hall, W. Hird, J. N. Hutchison, T. W. Jeffs, W. C. Laidlaw, J. F. McConnell, W. McDonald, W. B. McKechnie, M. McPhail, D. W. McPherson, J. K. McQuarrie, J. A. Malloy, G. E. Millichamp, G. Mussion, R. T. Noble, H. M. Paterson, E. K. Richardson, M. B. Smith, A. Webb, and E. A. Haist (starred).

DR. B. L. RIORDAN has returned from the annual meeting of the American Railway Surgeons' Association which was held in Chicago. We understand that some of the worthy visitors at the convention amused themselves one day by watching a wrestling match which took place between two young men, both of whom were wearers of two artificial limbs each. The maker of "the goods" was present as an exhibitor of surgical appliances.

MR. CHRISTOPHER HEATH, the London surgeon, was elected President of the Royal College of Surgeons of England, to fill the vacancy caused by the death of Mr. J. W. Hulke.

DR. S. COWAN, who has been practising on McCaul St., will remove back to the country and practise in Molesworth, near Listowel.

DR. J. L. DAVISON has resigned from Toronto University Senate, the vacancy being filled by Dr. G. S. Ryerson.

DRS. J. D. THORBURN and C. A. Temple will shortly be joined in wedlock to two of Toronto's fairest belles.

DR. D. A. DOBIE has once more returned to Toronto, and has settled at his old address, 116 McCaul St.

SIR J. R. REYNOLDS has been elected President of the Royal College of Physicians, London.

DR. CRAWFORD SCADDING leaves shortly for England, where he will remain some months.

DR. NORMAN WALKER has taken a down-town office on Queen St. west, near McCaul St.

DR. W. T. PARRY, of this city, intends removing to Spadina Ave. in the near future.

DR. F. P. COWAN has returned to Toronto after an absence of some months.

DR. HARRIS, late of Toronto Junction, has taken up house at 82 McCaul Street.

DR. TAYLOR has settled in practice on Spadina Ave., south of King St.

WE are pleased to hear that Dr. Spilsbury has recovered from his recent illness.

Obituary.

ANOTHER lamented death in the ranks of our profession is that of Dr. Nash, of Newmarket. His death took place on March 19th. The doctor was an Englishman by birth, and was educated at Oxford University. He settled about sixty years ago in Bridgeport, Conn. After practising there a few years, he moved to Toronto, but soon after settled finally in Newmarket. He was a man very highly respected.

WE very much regret to have to record the death, on May 11th, of Dr. J. Barker Peters, Superintendent of General Hospital at Medicine Hat, N.W.T., late of Toronto General Hospital. He was a brother of Dr. George A. Peters, of College Street, city.

DR. KENNETH H. L. CAMERON died April 8th last at Cayuga, at the early age of forty. He graduated from Toronto University in 1875, and up till the time of his death enjoyed an extensive and lucrative practice. He was also an active politician.

In dengue, Prof. Wilson says, in very many cases the eruption first shows itself upon the palms of the hands and the soles of the feet, and from these points it spreads itself over almost the entire surface of the body.

WISDOM FROM A LUNATIC.—There is a place near Glasgow, Scotland, where a railway track runs for some distance beside the fence of a lunatic asylum. Not long ago some workmen were busy repairing the bed of the railroad when an inmate of the asylum approached one of the laborers, and, from his position on the inner side of the enclosure, began a somewhat personal conversation: Inmate—"Hard work, that!" Laborer—"Troth, an' it is." Inmate—"Whit pay dae ye get?" Laborer—"Sixteen bob a week." Inmate—"Are ye mairrit?" Laborer—"I am, worse luck!—and have six children." A pause, then: "Inmate—"I'm thinking, ma man, ye're on the wrang side o' the fence."—*Berlin Budget.*