

trapped in the parts. The occlusion was so extensive, there was no possibility of regurgitation, or setting back of capillary circulation. The arterioles were found collapsed, and hence a large area of brain tissue was anæmic.

The only evidence of inflammatory action in all this wide area of disease was found in a small surface of the pia mater over the left second frontal convolution. The red, softened, and corrugated state of the lining membrane of the occluded vessels, no doubt, took place after the accident.

Aphasia was complete from first to last. Many interesting queries as to the mental state of this patient suggest themselves; but any adequate consideration of them would prolong this report to too great a length.

REPORT ON THE PROGRESS IN MATERIA MEDICA AND PHARMACY.¹

BY W. P. BOLLES, M. D.

THERE has been no important discovery in this line within the past six months, although some interesting investigations are in progress and will perhaps be ready for summarizing in a short time. Several of the newer drugs are being carefully analyzed by eminent workers, but evidence of their medicinal value is more wanting than the details of their composition.

JABORANDI.

In addition to pilocarpine, Messrs. Flarnack and Meyer have obtained a second alkaloid from this drug, which they propose to call jaborina: this alkaloid differs from pilocarpine in its sparing solubility in water and readier solubility in ether. It was separated from commercial pilocarpine, as a colorless amorphous body of strong basic properties, forming amorphous salts. Its action is said to resemble that of atropia upon a frog's heart; no other test appears to have been tried.

QUILLAIA IN EMULSIONS.

Nothing delights an apothecary like the prospect of making an "elegant" emulsion, so we have had emulsions with tragacanth, and other gums, with almonds, egg and pancreatine, in innumerable variations. Now quillaia in tincture appears as an emulsifying agent (it has, we believe, for some years existed in soda water syrups to make them foam). It will "extinguish" mercury, and holds oils, chloroform, copaiba, and resins in fair suspension. From one fourth to one eighth appear to be suitable proportions of the tincture for oils etc. Turpentine and copaiba require an equal quantity of the tincture, and resins still more; of course all with the addition of water.

CHIAN TURPENTINE.

Perhaps this substance received all the attention it deserved in the last report; but as Dr. Clay still maintains that he is justified in his claims for it, and as there is a constant, though moderate, demand for it, coupled with great difficulty in detecting the genuine from the numerous imitations, a word or two more may be accepted.

There are, it seems, only about a thousand old trees

¹ The Pharmaceutical Journal and Transactions. The American Journal of Pharmacy. The Pharmacist. New Remedies. Pharmaceutisches Centralblatt, etc.

in Cyprus, many of them very old and large. For many years little or none of the resin had been collected until last year, when the natives were surprised by the orders from England, and began to gather it again. The quantity from Cyprus can never be large, and collectors are already looking around in Asia Minor and Algeria for larger forests, so far without success being assured.

The description in the last report, although correct for a clean and pure product, does not correspond with the appearance of much of that at present in the market, and believed to be genuine.

Three specimens in the possession of the writer, with a satisfactory history of having come from Cyprus, are briefly as follows:—

(1.) Is a brownish-yellow, not quite transparent, honey-like, very sticky, liquid containing scattered grains of sand and bits of bark. Imported in cans.

(2.) Similar to number one, but darker, thicker, and dirtier.

(3.) Solid, brittle when cold, of a greenish or grayish-brown color, full of impurities (twenty-five per cent.). Imported in lined boxes. After softening with ether and straining the resin is deep yellow.

The odor of all the specimens is characteristic and similar, and the taste free from persistent bitterness.

Two specimens, believed to be factitious, have a coniferous odor, are clean and transparent, without bark, sand, or other obvious impurities, and leave a persistent, disagreeable resinous taste in the mouth. They were probably made from Canada turpentine. The present method of collecting the genuine article is such that a certain amount of bark and dirt is necessarily included, and a perfectly clean product, unless it comes with a history of being strained by reliable hands, should be avoided; but if the demand continues it is to be hoped that a more rational mode of gathering it will yield a more respectable product.

ACONITIA.

Mr. C. R. A. Wright, who has carefully investigated the constituents of the aconites, has given in detail the chemical distinctions between aconitia, pseudaconitia, and "Japaconitia," the two latter the alkaloids of Indian and Japanese species respectively. They are of too nice character for ready pharmaceutical tests, and will fail, therefore, directly to clear up the confusion in which these products have for some time been.

Crystalline aconitia has been for a number of years prepared according to the process of M. Duquesnel, but the alkaloids of the other two species can equally be prepared in crystals.

Dr. Wright considers aconitia to be the chief, if not the only, active ingredient of the roots of *Aconitum napellus*; that it occurs therein with other amorphous alkaloids of lower molecular weight, and containing a higher percentage of carbon. "If the amount of aconitia present relatively to the amorphous bases is not considerable it is often impossible to get it to crystallize at all; in any case a considerable amount of aconitia is retained in solution permanently by the agency of the amorphous alkaloids which thus cause considerable loss." Therefore crystalline aconitia can so far be prepared only at the expense of waste, and remains very costly. Amorphous aconitia, on the other hand, may be good in quality as a small portion of the uncrystallizable bases will suffice to prevent its crystallizing, but there seems to be no good way of determining it unless, pos-

sibly, the physiological one, which at least is inconvenient.

It is to be regretted that we are not in possession of facts showing the physiological differences in quality and intensity of the several alkaloids which are dispensed under the common name of aconitia, since, liable as he is to get any one of several different extremely active substances, without knowing which it may be, or whether it be a mixture of them, the physician cannot but be extremely liable to disappointment or alarm at the uncertainty of his results. It is at present best to prescribe the crystalline alkaloid in small doses, rather than larger doses of the others, which are of uncertain strength.

RESORCIN.

The increasing use of antiseptics in surgery within the last few years has brought to the notice of physicians many compounds, new and old, possessing the property of destroying the different plants concerned in putrefactive changes, and consequently stopping or preventing those processes; and as none of those in use are perfect and free from disadvantages, others will still be offered.

Carbolic acid, the oldest, of course stands first, and is in universal demand. Its disadvantages are its odor, which is offensive to many, its occasionally irritating character, and its serious poisonous effects when absorbed.

Thymol is occasionally used¹ and is very good. Menthol and many others are equally reliable, but no better than thymol.

Dr. Justus Andeer, of Wurtzburg, has just written a pamphlet upon Resorcin, as applied to medicinal uses, and recent numbers of *New Remedies* contain a long abstract of it.

It is a colorless, crystalline substance, of a sweetish and harsh taste, soluble in something more than its own weight of water, also soluble in ether and alcohol. It was first obtained in 1864, by fusing galbanum resin with potash, the result being about six per cent. It has since been made from other resins and in other ways.

Dr. Andeer found that a one per cent. solution prevented the decomposition of urine for months, and also destroyed the organic causes of putrefaction; it preserved pancreas and blood perfectly, retaining even their natural odors. Wounds treated by it healed by first intention, and those poisoned by septic material yielded to it as completely as to carbolic acid. Applied dry to the skin it is not absorbed, and is not irritating; hypodermically a two per cent. solution may produce painful cramps and twitchings, but never abscess. On the moist lips it will raise a white blister. Used with the atomizer it is entirely unirritating to either eyes or lungs, and nearly free from odor. Applied to granulations the crystals are a painless and mild caustic.

Dr. Andeer also recommends its internal use in diphtheria and other diseases, and as injections in leucorrhœa, etc. The dose is one gram to two in water, syrups, glycerine, etc.

— At Bellevue and the University Medical Schools the winter term of lectures closed the 1st of March, but at the College of Physicians and Surgeons the course will be extended until the 1st of May, the spring term having been abolished in this institution.

¹ See JOURNAL, volume cii. page 516.

Hospital Practice and Clinical Memoranda.

JUGLANS NIGRA, A REMEDY FOR DIPHTHERIA.

REPORT OF CASES.

BY C. R. S. CURTIS, M. D.,

Surgeon to St. Mary's Hospital, Quincy, Ill.

IN view of the fact that the mortality from diphtheria throughout our country, and especially in the Eastern States, has been very great for a number of years, notwithstanding the best efforts of the most scientific and successful practitioners, and in the hope that this communication may aid the profession to some extent in their efforts to cure this direful plague, I have been induced to contribute to your journal a short account of the results of some experiments recently made by me with a new remedy (at least a remedy that I have never yet seen recommended in any medical work or pamphlet for diphtheria).

I will premise by saying that in the treatment of this disease I had, previously to July, 1880, adopted about the following plan, with such modifications and changes as the individual peculiarities or the progress of the case might from time to time seem to indicate. Internally quinine and iron in liberal doses, preceded in most cases by a mild mercurial cathartic, also an occasional dose of chlorate of potash, and often, when the symptoms demanded it, I administered an expectorant mixture; the patients at the same time being sustained by milk, beef tea, egg-nog, and other nutritious diet.

Locally, I was in the habit of applying freely over the neck, throat, and parotid glands equal parts of tincture iodine and tincture camphor. The throat was gargled alternately with Ingals' solution of iodine, solution of chlorate of potash, and solution of acetate of lead in dilute acetic acid or with alum in the same, as advised by Trousseau, and the mouth and throat were sprayed frequently with diluted sulphurous acid. This method, I presume, did not differ materially from the general plan of treating diphtheria by many of the best practitioners in this country.

My success was certainly as satisfactory as that in cases generally reported. I could record the recovery of quite a large percentage and number of my cases. Still my treatment did not always succeed, and therefore I felt justified in cautiously trying new remedies where there was a reasonable hope of their proving useful.

About the 1st of last July, while reading Nélaton's *Éléments de Pathologie Chirurgicale*, I came across the following passage in volume i., page 339, in regard to the treatment of pustule maligne. It is to be presumed that the walnut leaves alluded to by Nélaton were those of the *Juglans regia* and not the *Juglans nigra*. But the properties of the various species are said to be much the same. M. Nélaton remarks:—

"En 1853 un praticien de Perpignan, M. Pomagral, annonçait dans les Annales de Montpellier qu'il guérissait la pustule maligne par l'application de feuilles ou d'écorce de noyer fraîche. M. Raphaël (de Provins) institua cette medication dans un cas de pustule maligne où il était impossible, à cause du siège et de l'étendue du mal de pratiquer la cautérisation. Le malade guérit. Encouragé par ce succès, le même