

care of their instruments as they did of their wives, for both were plain and apt to be good-tempered, and the old doctor's saddle-bags contained about as many instruments as his wife had accomplishments. Grandma'am could sew, knit, spin, and keep house; and in the bags were the syringe, lancets, dental forceps, and splints. Nowadays, when feminine accomplishments are many and wonderful, it is not always an easy task to keep them in order; and so of the thousand and one instruments. What is worth buying is worth keeping, and even if there is money enough in a physician's pocket to replace an instrument, when it gets rusty or tarnished, with a new one, nevertheless there are no medical men who can afford to let an instrument be ruined by aught else than actual wear. But extravagance rules in our day; and while we occasionally see an old practitioner's steel as bright as a mirror, not a few of our younger men show cabinets of tarnished instruments, and are in frequent communication with the manufacturers. Now, these things should not be. As was said about wives—let good instruments be purchased; let no flirtations with other makes occur; let the armamentarium be kept, and, moreover, let it be kept well.

Of course, the paramount question is as to how this last point is to be secured, and assuredly nothing in the same connection can be more important. It is not strange to hear it said that perfect preservation is impossible, and that the steel and nickel, silver and gold are of poor quality. This last may sometimes be true, but it must be admitted that there is really very little poor material used. The fault is not the maker's. If one buys a good instrument, that is good when bought, good it is, and good it will be, if it is properly taken care of.

My method may not be so good as that of some others, but permit me to say that it has proved perfect in my hands, and with such a commendation is worth describing for its simplicity if for no other reason. When I graduated and began practice I found that I was not to have time to use the chamois skin very often, and active practice has proved this true. Something else had to be done, and by some happy chance I hit upon it and have followed it ever since. I simply use a well known laundry article called "pearline" and sweet oil. Whenever an instrument is used it is washed as soon as possible in tepid water, to which the pearline is added, a tablespoonful to a pint. The washing removes all foreign matter, and the instrument is at once dried with a soft towel and then dipped in the oil. The process is not complicated at all, and the result is that instruments that came out of the shop in 1875 are in as good trim as ever—bright, clean, and without a blemish. Let me recommend this treatment to all who want to keep their instruments looking well and in a serviceable condition. Pearline is kept by all grocers, and the oil is always in every well regulated physician's closet, and between the two articles and a good towel there is no reason why we cannot be proud of the looks of our instruments every time we have to use them.

W. H. M.

WESTFIELD, N. J.

### A PECULIAR SYMPTOM IN TRICHINOSIS.

EDITOR JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION.

*Dear Sir:*—I desire to call the attention of the profession to a symptom or condition which I have noticed very prominently in two cases of trichinosis, and which was present in two other cases, though not so prominent as in the first two, or so evident that I would have observed it had I not looked for it.

This condition was a yellowish color in one case, and a brownish yellow color in the other three, extending over the hands and wrists and up the forearms over both flexor and extensor surfaces. The skin elsewhere was clear, and the conjunctiva showed no signs of jaundice. My attention was first called to it by one of the patients on whom it was present; afterward, upon examination, it was found on all four, occurring, as near as could be ascertained, about the seventh day of the disease.

So far as I am aware this coloration of the skin has not been mentioned in the clinical history of any disease; and if, upon further inquiry, it should be found present in a large percentage of cases of trichinosis, it seems that it should be looked upon as a diagnostic symptom. Of the above cases two died, and pieces of muscle from each showed the trichina spiralis in large numbers. This peculiar color was much more marked in the two fatal cases than on the other two. The family in which these cases occurred consisted of ten members, all of whom ate of the pork cooked, after which, at the same meal, six ate some of the raw pork. Of the six, all were affected with trichinosis; two, one of whom died, were taken sick at the end of a week, while the other four were seized a week later, and one of this number died. Of the four, two received gr. xx of calomel early in the course of the disease; it acted promptly as a cathartic and emetic, and they made a rapid recovery. No color was seen on the hands of these two, as in the case of those who were sick for a week and longer. All the symptoms given by writers as occurring in trichinosis were present in these cases to such an extent as to render a diagnosis comparatively easy, but my diagnosis was doubted until the microscopist confirmed it by discovering the trichinae.

E. S. RICHARDSON, M.D.

REED CITY, MICH., March 26, 1884.

### PLACEBOES.

EDITOR JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION:

Please do me the kindness to insert in your journal the following, which is a copy of a letter just mailed by me to the gentleman mentioned in it, and oblige

Yours, etc.,

D. W. CATHELL, M.D.,

Author of "The Physician Himself."

BALTIMORE, April 2, 1885.

J. B. MURDOCH, M.D., Pittsburgh, Pa.:

DEAR DOCTOR:—My attention has been called to your criticism of my little book in the JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION of March 28.