

not an advocate of the use of ice bath or of any of the newer antipyretics. Quinine, he finds, fills every indication for pyrexia, and this he administers in 5-grain doses every two, three, or four hours until the reaction takes place. Fluid extract of cinchona may be used alternately with the quinine. A mild saline may be added. On the question of the use of opium in pneumonia he is more for than against, especially for those patients in whom there is no indication of kidney changes. A good plan is to give morphine in small doses with a suitable vehicle, preferably compound spirit of ether. As for the heart failure condition, in the acute engorged pulmonary areas with cyanosis, or even jaundice, he sees an indication for venesection, withdrawing as much as twelve ounces of blood. If the heart begins to falter and the pulse becomes irregular and small, give oxygen and do not put it off until late in the disease. Ten-minute intervals are sufficient. Strychnine is recommended. Digitalis he does not think so serviceable as strychnine. Musk is also advocated. Tincture of musk with Hoffman's anodyne makes an excellent mixture. Two or four ounces, or even more, of brandy a day will prove of service.—*British Medical Journal*, 1902, No. 2188, p. 1573.

Action of Heroin and Dionin on Respiration.—**DR. C. R. MARSHALL** makes a contribution from a scientific standpoint on the action of these two morphine derivatives. From the standpoint of the pharmacological relation to the chemical formula of these drugs the inference has been drawn that dionin more closely approximates morphine in its action than heroin. It is more sedative to the nerve structures than heroin, is less convulsant, less active on the respiratory centre, and less toxic. Compared with morphine it is less toxic, less sedative, more convulsant, and less depressant to the respiratory centre. Heroin compared with morphine is much more toxic, much more convulsant, and much more active to the respiratory centre. Since the action of these two drugs, particularly on the respiration, is in need of thorough investigation, conclusions are well worth recording. He finds that heroin can prolong inspiration and increase the depth of respiration, but that the limits of its beneficial action, unless simple slowing is required, are soon passed. Slowing is always produced. In moderate doses it depresses the respiratory centre. Dionin appears to be slightly more sedative than codeine, but otherwise it possesses the same action. Heroin has a much greater effect on the respiratory centre, an action which has been compared to the action of digitalis on the heart.—*British Medical Journal*, 1902, p. 1219.

Injections of Yolk of Egg for Tuberculosis.—**DR. T. BAYLE** makes the ingenious suggestion to use the yolk of egg, rendered more fluid by equal parts of physiological salt solution, by hypodermic injection for the treatment of tuberculosis. At least an ounce may be introduced without fear of setting up a local irritation. The results are claimed to be excellent in those cases of deficient alimentation from severe gastric disturbance. The author holds that the lecithin which is normally present in large amounts in the yolk of the egg is not subjected to the molecular breakdown incident to its passage through the digestive process. The procedure is contrain-

licated when the digestive processes are normal. The author holds that the lecithin of the yolk is more stable than any of the heretofore produced lecithin on the market. Injections should be made of sterile material subcutaneously.—*Lyon Médicale*, 1902, No. 14, p. 427.

Pseudaconitine and Japaconitine.—DR. J. THEODORE CASH, in a study of these alkaloids related to aconitine says that, used inwardly, pseudaconitine and japaconitine given in the proportion indicated (pseudaconitine, 0.4 to 0.45; japaconitine, 0.8 to 0.9, the dose of aconitine) may be employed for modifying circulatory activity in some febrile states, for the relief of pain, and for other purposes which have been answered by the exhibition of aconitine. It may be added that solutions of the alkaloids would be very preferable for employment to preparations of the plants which yield them, for in the latter the main alkaloids not only vary in proportion but are often associated with other principles which have a somewhat neutralizing or qualifying effect. For local relief of pain the three alkaloids have been found to act well in similar proportions (2 per cent. to a basis of oleic acid and lard in the British Pharmacopœia being the proportions employed). When the use of such a potent preparation is contemplated it is essential that the cutaneous surface should be sound and free from abrasion.—*British Medical Journal*, 1902, No. 2181, p. 1243.

Mannitol Pentanitate.—DRS. C. R. MARSHALL AND J. H. WIGNER conclude a series of studies of this new vasodilator as follows: It is evident from the sphygmographic tracings that mannitol pentanitate is less active than erythrol tetranitate, but much more active than mannitol hexanitate. It would undoubtedly prove a useful drug if erythrol tetranitate were unknown, but its only great advantage over this substance is its relative cheapness when prepared on a large scale. It can, however, in double the dose produce all the effects of erythrol tetranitate. It can as readily be obtained pure, and it is somewhat more stable. It possesses the usual ill-effects of the organic nitrates—slight heaviness and tendency to headache, and it also has a bitter taste. Pharmacologically, it is very interesting, but its mode of action and certain other points we must leave to a future communication. The second objection to erythrol tetranitate is its explosiveness. When rapidly heated, sometimes when struck, it detonates and disappears. If handled with ordinary care, however, it is quite harmless. It can be made perfectly so by mixing it with oil of theobroma, which is easily done by melting and then converting this into tablets. And this, besides being the best form, ought to be the most economical, as it is unnecessary to crystallize the nitrate previous to mixing it with the cocoa-butter. Mannitol pentanitate, in this respect, possesses advantages over erythrol tetranitate, since it is more stable and much more soluble in oil of theobroma.—*British Medical Journal*, 1902, No. 2181, p. 1231.

Treatment of Graves' Disease.—DR. M. SCHULTES has made a series of investigations on the action of a serum obtained from sheep or dogs from which the thyroids have been removed, following the initial suggestion of Ballet and Enriquez. He reports the case of a woman, aged forty-two