and antiseptic, particularly in catarrhal conditions of the nasal cavities.

"BIG RAPIDS" MEDICINAL WATER (ALTERATIVE).

(INGRAM AND ROYLE, LIMITED, 52, FARRINGDON-STREET, E.C.)

Some idea of the degree of mineralisation of this water may be gained from the fact that it contains about ten times the quantity of mineral salts present in an equal volume of sea water. Nor are the constituents very widely different, 73 per cent. of the saline residue (itself amounting, according to our analysis, to 338.60 grammes per litre) consisting of common salt, 18.5 per cent. of calcium chloride, 8.0 per cent. of magnesium chloride, and 0.5 per cent. of bromide of sodium. It is, in fact, supercharged with salts—is saturated. It is described as the strongest natural medicinal water known, as an alterative and not purgative, as proof against freezing, and as non-injurious to jewellery. The addition of chlorine water turns the water a bright brown colour from the liberation of bromine. Except, perhaps, for the important quantity of bromide of sodium it contains, we do not know what advantages it offers therapeutically over a saturated solution of common sea salt, used either externally or internally as recommended.

New Inventions.

A SIMPLE FORM OF EVACUATING SYRINGE FOR LITHOTRITY CASES.

I HAVE lately had made for me an evacuator which presents certain advantages over those generally used in the operation of lithotripsy. It consists of an indiarubber ball, shaped like a pear with two stems, one at right angles to the other. The one carries a vulcanite or metal socket to receive the evacuating catheter, the other a glass receptacle for debris. This is the whole apparatus; there are no valves, no taps, and no detachable portions; the shape is such as to allow of direct filling and cleaning, the action of gravity alone being depended on to prevent the return of debris into the bladder, and the skill of the manipulator to obviate any escape of fluid. The simplicity of the apparatus is such as to raise doubts of its efficiency. I have, however, used it in some 100 lithotrities, removing with it stones of four, six, and eight ounces, and in one case a dense stone weighing twelve ounces. In this case the operation was completed in 125 minutes, being at the rate of 46 grains a minute—a record which but few syringes have surpassed. I can, therefore, confidently recommend operators to give the instrument a trial, and I think they will find that it possesses the following among other advantages. 1. It may be very easily and thoroughly sterilised by chemical antiseptics. This point has not, I think, received sufficient consideration, and it is very easy to see that an infected syringe may have a very prejudicial effect on the result of an operation. 2. Its shape is such as to allow the operator full control over the movements of the evacuating tube, and the size and shape of the ball may be varied to suit different operators. 3. It is greatly cheaper than any other form.

The following directions should be attended to in its use. In filling the syringe (the open end being held uppermost) water is introduced from a tap or jug; when three-quarters full the syringe must be slightly tilted to empty the glass receptacle of air. On attaching the syringe to a catheter the filled syringe is closed by the operator's right thumb and brought up to the end of the catheter; the thumb is then slipped aside and the connexion rapidly made. With a little practice not a drop of water need be spilt. If preferred, the catheter, filled with water, may be attached to the syringe before introduction. In the evacuation of debris the compression should be, as usual, gradual and the expansion sudden. A very slight pause should be made after expansion to allow the fragments to settle. The construction of the syringe is such that it forms practically a handle to the evacuating tube; under these conditions the exploration of the bladder cavity by the tube is greatly facilitated, and fragments may be readily sought for, identified, and removed either from the general bladder

cavity or from sacculations. On emptying the syringe close the orifice with the thumb, invert the syringe so that the glass receptacle becomes the highest part, and the debris falls into the ball cavity. Now turn the syringe so that the orifice becomes the lowest point and allow the debris to settle; then remove the thumb and the debris escapes with-

the water, one or two squeezes expediting the escape. It may be necessary to rinse with sterile water to remove the last fragments. For sterilising fill the syringe with hot lysol solution (2 per cent.) or sublimate (2 per cent.) and leave for twenty minutes; wash out well with sterile water. The syringe may be obtained from Down Bros., St. Thomas's-street, Borough, London.

Cairo.

H. MILTON, M.R.C.S. Eng., L.S.A.

COMBINED BED AND DOUCHE PAN.

FINDING that with the ordinary bed-pans I was unable to give vaginal douches without considerable discomfort to the patient, from the water passing over the back of the pan into the bed and so wetting the bed or night-clothes, I devised this pan with the view of obviating this nuisance. The accompanying diagram will best explain what I claim for it.

The patient's buttocks rest on the bridge so that any water running out of the vagina and passing under the thighs re-enters the pan behind the bridge, instead of, as in the ordinary bed-pans, being conveyed into the bed or up the patient's back. Other points in favour of this pan are—(a) the large quantity of fluid it will hold, thus allowing of free douching in cases of vaginal irrigation; (b) the fact that it can be used equally well for the ordinary purposes of a bed-pan; (c) the ease and thoroughness with which it can be cleansed; (d) the ease with which its contents can be examined, there being no corners or hidden places anywhere; and (e) the comfort to the patient, and the fact that she can adjust it by means of the handles at the side comfortably in position. The pans are made by Messrs. Woodward and Rowley of Swadlincote. I have had one in use for some months, and patients and nurses speak of it as being much more comfortable than the other pans in use.

H. WYCLIFFE FISHER, L.R.C.P. & S. Edin., &c.
Swadlincote.