personnel and patients, such as phonographs, billiard tables, magazines, newspapers, boxing gloves, etc., the following method of mess management has been found to be simple and efficient.

1. Determine the daily income of the hospital from the value of the ration.
2. Obtain price lists from several reliable dealers, of articles of food in the market, and from these daily make up bills of fare, showing the cost of each dish and each meal.
3. Do not attempt to save more than 21 per cent of the value of the ration.
4. By daily supervision and inspection of accounts and purchases insure close buying by the mess-sergeant and purchase in bulk when economical.
5. By daily inspection of the cooking and handling of the food insure intelligent co-operation between the mess-sergeant, cook and waiters. Always inspect the kitchen garbage can to detect carelessness and waste.

The Pharmacology of Scopolamin. By J. Heyward Gibbs, Columbia, S. C. *Journal of the South Carolina Medical Association*, March, 1915, pp. 77-79.

Desirability of review of this phase of subject because of popular and pseudo-scientific articles that have recently brought "twilight sleep" into the foreground. Tendency has been to stress analgesic action of drug without due reference to possible dangers.

Scopolamin an alkaloid of the atropin series. Now known to be identical with hyoscin. Action in general similar to atropin. But has more powerful central effect. Small doses cloud consciousness, larger ones produce complete abeyance of higher psychological functions. Sense-deceptions, hallucinations, and even true delirium may be encountered in over-dosage.

Scopolamin acts upon endings of vegetative nervous system, having motor and secretory sedative effect. Dilatation of pupil, paralysis of accommodation, relaxation of intestines, inhibition of uterine musculature, and dryness of mouth and throat are seen.

Impure preparations may contain apotropin, a potent poison to central nervous centers.

Synergistic action of morphine and scopolamin used by Kronig and Gauss in production of "twilight sleep." They consider procedure unsafe unless experienced medical attendant be constantly by patient.

Pharmacological action of scopolamin upon foetus may be assumed to be exaggeration of that upon mother. Increased potency of respiratory depressant action upon an uninitiated respiratory mechanism may permanently discourage post-fœtal function. "Blue babies" common experience of those who use scopolamin in this way.

A Case of Sporotrichosis. By R. H. Haynes and S. L. Cherry, Clarksburg, W. Va. *West Virginia Medical Journal*, March, 1915, p. 303.

The patient was a farmer, age 44. The first lesion involved the right hand at the junction of the little and next finger as an elevated warty growth that was ulcerated and was discharging a thin, serous fluid. A series of red subcutaneous nodules extended at intervals all along the flexor and outer surface of the arm. Between the nodules the lymphatics could be felt and the axillary glands were enlarged. There was but slight tenderness. One of the non-ulcerated lesions was opened and cultures made from the scrapings; a pure culture of *Sporotrichium Schenckii* was obtained. No organisms were found in smears made directly from the lesions; the only feature was the abundance of large mononuclear cells containing inclusion bodies. Complete cure followed the administration of potassium iodide.

Report Concerning Heliotherapy and Ionic Medication as Employed at Las Animas, Colo. By C. J. Holeman, U. S. Navy, Washington, D. C. *United States Naval Medical Bulletin*, January, 1915.

Four cases of bone and joint tuberculosis and one sinus treated by heliotherapy and seven throat cases treated by ionization were reported.

Exposure to sunlight was made after the manner of Rollier. Care was taken to prevent sunburn, early exposures being reduced in blondes, since sunburn delays effective treatment and acquirement of uniform pigmentation which is an index of the onset of improvement. All gained weight, felt and ate better than under other treatment. The sinus, which discharged two fluid ounces of pus on admission, would not admit drainage tube after one month.

Ionization has here proven of greater value in holding tubercular laryngeal symptoms in abeyance than any other method. Treatment consists of administration of twenty grains of potassium iodide shortly before current is started placing in position a pad of several thicknesses of felt soaked on two per cent zinc sulphate solution in immediate continuity with the positive metal electrode; placing in position at back of neck a large wet negative pole and employing current of 75 to 150 milliamperes 10 to 20 minutes. If negative pole be saturated with salt solution chlorine ions, similar in effect to iodine, will pass toward positive pole. All cases showed improvement—diminished areas of infiltration and ulceration with diminished dysphagia. One case of ulcer cured recurred when treatment stopped. One non-tubercular case (peri-tonsillar abscess) after one treatment, employing zinc and chlorine ions, immediately discharged a great quantity of muco-purulent material with great relief.