ice. A spare, semi-solid diet, such as a little milk pudding, bread and butter, thin sandwiches made with pounded chicken or hard-boiled eggs, which can be increased in quantity or improved in quality, should be employed. Stimulants of all kinds should be forbidden, excepting under especial circumstances.—*The Clinical Journal*, 1898, No. 271, p. 161.

The Treatment of Acute Articular Rheumatism by Intravenous Injections of Sublimate.—DR. GUSTAV SINGER details the process as follows: The arm is left hanging over the edge of the bed, in order to bring the veins into prominence, or a compress above the elbow is employed for this purpose. The skin in the region of the elbow is then disinfected, first by energetic rubbing with soft soap and warm water, next with a $\frac{1}{10}$ per cent. sublimate solution, and lastly with ether and alcohol. A sterilized syringe provided with an asbestos piston is filled with the solution and inserted into the lumen of the vein in the direction of the blood-current and parallel to its course. As soon as the color of the solution in the syringe has indicated that the needle has entered the vein (blood entering reddens the solution), the compress is removed and the injection is slowly made. The point of insertion is covered with the finger, the needle removed, and the opening closed with iodoform-gauze and an appropriate bandage. The solution employed is: corrosive mercuric chloride, 1 or 2; sodium chloride, 1 or 2; distilled water, 10. The dose of sublimate is from $\frac{1}{8}$ to $\frac{1}{2}$ grain. The only difficulty is found in the insertion of the needle into the vein. Sometimes a little blood escapes from the vein under the skin, forming a small but painless sugillation. The injection can be made alternately in each arm. Six to ten injections in the course of treatment, at most, being necessary, it is well to begin near the wrist, and later inject nearer the elbow. If the weaker solution is employed, daily injections are in order; if the stronger, then once in two days is sufficient. The mouth and teeth must be carefully looked after and cleansed. For this purpose potassium chlorate is used as a mouth-wash. Of the eleven patients under observation, one developed diarrhoeal stools, with small amount of blood, and two albuminuria, but casts were not found. The results which were observed from this treatment were: 1. The pains were lessened, and consequently sleep was permitted. 2. Swelling was remarkably diminished in the joints primarily affected, but secondary infection of other joints was not prevented. This is not an argument against the use of this method, for it occurs with others—*e. g.*, the use of salicylates. 3. If the injections are given in the morning, the expected afternoon rise of temperature is postponed for several hours, lessened, or abolished altogether. The indications for this method are: Acute articular rheumatism of infectious initial processes (erysipelas, phlegmon, puerperal affections) or peculiar history (chills, recurring endocarditis, frequent exacerbation, protracted subacute course, metastases) which point toward a pyæmic character. In acute disease, when the salicylates are forbidden, or when the inflammation is localized in single joints, this method is recommended. The contraindications are to be found in very weak individuals, severe renal degeneration, and by onset of severe symptoms of poisoning.—*Centralblatt für die Gesamte Therapie*, 1898, 1 Heft, S. 1.