and also in boils. In cases of the latter, combined with iron, it is more useful, while a favorable and palatable recipe, where cod-liver oil is thought to be required, is the following: Take of gum arabic, 3x; water, 3j; syrup of lactophosphate of lime, 3iij; cod-liver oil, 3iv; essence of bitter almond, miiij. Phosphate of lime is not merely a drug "able to harden bones," but becomes an active agent in nutrition. In acne and similar diseases due to nutritive debility, it is often distinctly valuable—often more so than calcium sulphide.

A New Human Parasite of the Sarcoptic Tribe.—RUDOLPH MENDER, of San Antonio, Texas (*Journal of Cutaneous and Genito-urinary Diseases*, September, 1897), gives the following history of a case: Eight months before, the patient, an aged man, residing in Texas, became affected here and there with small, fiery-red papules, which at times under treatment seemed to get well, but at other times under local remedies to reappear. There was no itching, but at times slight burning. "The animalculæ, it seems, on maturing, emerge from the skin;" . . . "various remedies cause many of all sizes to come to the surface, some bore under the skin again, and, although I have picked off thousands, I have never seen one move. One of the annoyances to the patient is their crawling on the skin. Their bite is much like that of a flea or a chinch, and often so rapidly is it done that the mite will bore in before you can pick it off with the point of a knife. The bites and pimples never suppurate nor exude serum." The case was studied for eight months by several physicians, including Drs. Flemming, Bœcking, and Allen J. Smith, the latter believing that the parasite corresponded with the genus *chorioptes*, species *ecaudatus*. Scabies and pediculosis were excluded. Illustrations accompany the article.

OBSTETRICS.

UNDER THE CHARGE OF

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The Intra-uterine Use of the Colpeurynter.—KLEINHAUS (*Monatsschrift für Geburtshülfe und Gynäkologie*, 1898, Band vii., Heft 2) reports a series of seven cases where it was imperative to end labor rapidly, in which good results were obtained by placing the colpeurynter in the uterus, and thus securing prompt delivery. He considers this method useful in eclampsia when dilatation has already commenced. Where there are pathological changes in the uterus the use of elastic bags is not advisable, for labor pains may become weaker instead of stronger under their use. In abortion, where

it is necessary to dilate the uterus, solid dilators are better. Bags made of inelastic material are most efficient.

The Etiology of Hydramnios.—OPITZ (*Centralblatt für Gynäkologie*, 1898, No. 21) has been impressed by the familiar fact that the fœtus is usually dropsical in cases of polyhydramnios. He found by experiment that normal amniotic liquid contains no substance which increases the production of lymph or irritates the excretory organs.

On the contrary, in hydramnios the amniotic liquid when injected into animals at once increases the formation of lymph, and greatly irritates the kidneys. As the fœtus evidently swallows amniotic liquid, there is set up a vicious circle by which irritating material is kept in constant circulation in the blood of mother and child.

Appendicitis Complicating Pregnancy.—In the *Annales de Gynécologie*, 1898, vol. xlix., PINARD reports the case of a woman, aged twenty-five years, and six months pregnant. A typical attack of appendicitis occurred, and on the fourth day operation was performed for swollen belly, feeble pulse, and evident sepsis. On incising the abdomen pus escaped; a second incision was made in the left lower quadrant, and a similar condition found. Abortion occurred that night, followed by death of mother and fœtus. On making cultures from the umbilical cord, the colon bacillus was found in abundance, having evidently escaped through the ruptured appendix.

Ophthalmia in the Newly-born.—In the *Medical Press and Circular*, 1898, Nos. 21 and 22, STEPHENSON contributes an excellent practical account of this disorder and its treatment.

He draws attention to pre-natal infection, and in most cases thinks infection occurs soon after birth by opening or rubbing the child's eyes. Gonococci are the cause in two-thirds of all cases. He urges thorough examination under ether, if needed. While gonococci are usually found, other germs may be present.

He advises nitrate of silver, 10 grains to 1 ounce distilled water, twice daily; applied by brush, of cotton, on German silver rod. It is unnecessary to remove excess with salt solution. Antiseptic solutions should be applied twice daily, not with syringe, but with cotton. To prevent adhesions of lids an antiseptic ointment should be used. Unna's is a good one: 3 per cent. hydrogen peroxide, with lanolin and vaseline. He considers complicated apparatus for treatment unnecessary.

On an average, 10 per cent. of children so affected lose one or both eyes. If the cornea is clear when the child is first submitted to treatment, the prognosis is good.

Partial Occlusion of the Pelvic Brim by the Soft Parts.—In the *British Medical Journal*, 1898, No. 1954, WILLIAM C. LUSK contributes a very interesting description of frozen sections of a woman who died in the first stage of labor. Among other interesting details which the study of these sections affords, the practical point is brought out that the pelvic brim in this patient was so lessened by the soft parts that a normal bony pelvis was