anesthesia for operations upon the upper half of the body.—*Journal of the American Medical Association*, 1906, No. 9, p. 647.

Stovaine.—DR. H. GERAUD summarizes the results of the observation of a number of instances of spinal anesthesia with the conclusion that stovaine possesses certain undoubted advantages, such as rapidity of action, general harmlessness, absence of pulmonary complications, of prolonged vomiting, etc. Its disadvantages are fewer than those of chloroform. The only unpleasant effects observed by the author have been certain disturbances of the sphincters and irritation of the medulla evidenced by muscular contractions. The instances of fatality reported have, however, influenced the view point and have rendered it impossible to consider spinal stovainization with a perfectly tranquil mind. It is however preferable to chloroform under certain conditions and while not perfect in every regard, offers certain advantages. The ideal method of anesthesia is still undiscovered.—*Journal de Médecine de Paris*, 1906, No. 3, p. 32.

DR. L. KUGEL reports several operations for warts, phimosis, etc., performed under stovaine, from which he concludes that in this substance we have a local anesthetic which is fully the equal of cocaine. In no instance were unpleasant after-effects noticeable, and in the patient upon whom the phimosis operation was done the anesthesia lasted twelve minutes. In each operation a 1 per cent. solution was used. Stovaine is a glistening crystalline powder, easily soluble in water, and its solution may be readily sterilized by boiling. In 10 per cent. strength it may be employed as an anesthetic in tooth extractions, here being injected into the gums. The drug has the advantages of cheapness, only slight poisonous effect and stability.—*Wiener klinisch-therapeutische Wochenschrift*, 1906, No. 7, p. 161.

Alcohol in Acute Illness.—DR. G. NEWTON PITT considers that alcohol should be administered in acute disease under the following conditions: (1) Failing circulation, indicated by rapid, feeble, dicrotic, or irregular pulse, and a feeble first sound to the heart whether appearing suddenly or gradually. (2) In feeble, exhausted, especially alcoholic subjects, also in the aged or very young. (3) Inability to take food, from failure of digestion, with a dry tongue, especially if persistent. (4) Persistent pyemic conditions with high temperature. (5) A condition of low muttering delirium with profound exhaustion and insomnia. (6) During convalescence from acute illness while the appetite is still capricious. As a stimulant the alcohol should not be diluted too much, but is best given in a little water or food. For hospital patients, simple alcohol diluted is superior to inferior spirits or wine. When old, well-matured spirits or wines rich in ethers can be obtained these are undoubtedly preferable. Champagne is often valuable when the appetite has failed during long illness or in convalescence from protracted illness, and especially in children nothing is equal to a fine old sherry. The amount of alcohol given during twenty-four hours may be from 2 to (rarely) 6 ounces in divided doses. This quantity may be exceeded in combined pericarditis, endocarditis, pleurisy, and pneumonia due to rheumatism, and in a few instances of very severe pyemia. The proper action of the drug is evidenced by an amelioration of all the symptoms. When too much is given, the