THERAPEUTICAL.

Sulfonal in Insanity.—(*Die Therapie der Gegenwart*, June 1895). In the Marburg clinic for mental diseases Schedtler administered this drug to forty-one insane females. As a rule the usual doses were given. Restless and apprehensive cases received from .05 to 0.3 gms. several times in the 24 hours. Disagreeable effects were repeatedly observed. The objective symptoms which in the insane he considers especially important are in mild forms of sulfonal intoxication—drowsiness, pallor and nausea shown by frequent spitting and uneasiness, also vomiting, staggering gait and sometimes diarrhoea. If the sulfonal be discontinued when these characteristic symptoms first appear, the patients without exception recover completely. Permanent ill-effects were never observed. The dose necessary to cause intoxication fluctuated between wide limits, and appears to depend upon individual idiosyncrasy. The great majority of the patients to whom this remedy was regularly given for a long time bore 1.0 gms. to 2.0 gms. a day without any unfavorable influence. In two cases, however marked symptoms were observed. The first received a relatively large amount of sulphonal in a short time (from June 8th to July 5th 68. gms.), and suffered from vomiting and diarrhoea. The patient presented a miserable, dejected appearance. Some sugar was found in the urine but no albumin. Upon discontinuing the sulphonal the condition improved and recovery took place. The symptoms in the second place pointed to cerebral toxæmia. There was also a cutaneous eruption present. Even when this drug is well born, S. advises that it should never be given in daily doses of from 2 to 3 gms. more than several months, without discontinuing it from time to time, or changing it for another narcotic. By observing carefully these rules, cases of severe intoxication have not occurred in the clinic for the past two years.

FREEMAN.

Trional Poisoning. (*Die Therapie der Gegenwart*, June, 1895.) H. Reinicke reports a case of chronic trional poisoning, which developed in spite of the most careful administration of this remedy. From time to time it was discontinued, the diet was guarded, and the action of the kidneys and bowels closely watched. In all, the patient received 40 gms. in 107 days. Suddenly she complained of headache and dizziness. Two days later, although the trional was stopped, nausea and diarrhoea with thin watery blood stained passages came on. Four days afterwards the urine voided was of a dark red color, and contained albumin and numerous hyaline and granular casts. Two previously reported cases also in women, had a lethal ending. The profuse bloody diarrhoea in the beginning of R.'s case is of interest, as in the cases previously reported constipation was observed. It is apparent that the bloody diarrhoea, which disappeared immediately upon discontinuing the remedy, was caused by the trional exerting the same injurious influence on the gut as on the kidneys. The interest of this case lies in the fact that only a relatively small amount of trional was administered, and yet under the most careful management poisoning occurred.

FREEMAN