

lowing is the formula employed: Axunge 30 *grammes* (seven and a half drachms); proto-sulphate of iron crystallized and washed, 50 *centigrammes* to 1 *gramme* (eight to fifteen grains); dissolve the salt in a few drops of water, and incorporate it immediately with the axunge. Keep it from contact with the air.—*Bulletin Gén. de Thérap.*, 1854, p. 553.

33. *Employment of Alkaline Carbonates in the Treatment of Membranous Angina.*—M. MARCHAL DE CALVI advocates the employment of alkalis in this sometimes most intractable disease, and cites cases treated by the bicarbonate of soda, in which the recovery was rapid, immediately following its administration. In the first case, the mucous membrane, at the back of the throat, was very red and œdematous; the mucous membrane, too, covering the palate and tonsils, was covered with stripes and patches of false membrane. This exudation was beneath the epithelium, for it could not be scraped off with the nail. Deglutition was performed with considerable pain. Twelve leeches were first applied to combat the inflammation, and three drachms of bicarbonate of soda were ordered to be divided into twelve packets, one to be taken every half hour, in a spoonful of water. Upon returning, after an absence of four hours, he found that the leeches had drawn a large quantity of blood, which was decidedly less plastic than natural. Upon examining the throat, the false membrane was found to have disappeared entirely. This the author attributes to the administration of the bicarbonate of soda, whose action he thus explains. Its first or chief action is to render the blood less plastic. It is with this object in view that the medicine is prescribed; but there seems to be another mode of action in this peculiar disease, which M. Suresure has supposed likely to exist, viz: a local action; which may account more satisfactorily for its rapid action in the case just recorded.—*Dublin Hosp. Gaz.*, 15th May, from *Gazette Médicale de Paris*.

34. *Inhalations of the Fumes of Opium in Coryza.*—Dr. LOMBARD, of Geneva, has found that in those severe cases of coryza which are accompanied by great pain and sense of weight in the frontal sinuses, the inhalation of the fumes of burnt opium affords the patient the most marvellous and speedy relief. The pain ceases as if by enchantment, and the patient passes from a state of misery into one of comfort. Dr. Lombard recommends a few grains of powdered opium to be thrown upon a slip of metal, previously heated in a spirit lamp; and the patient is desired to hold his head over, and forcibly to inhale the fumes of the drug.—*Gaz. Médicale*, July, 1854.

35. *Chloroform for the Treatment of Lead Poisoning.*—Chloroform is recommended by M. ARAN, Physician to the Hôpital St. Antoine, in Paris. He has just published a somewhat lengthy paper on its use, in which he gives some very interesting illustrative cases. One of these occurred in a house painter, æt. 31, who was affected with lead colic for the second time, after having followed his trade for twenty years. There were obstinate constipation, bilious vomiting, pain in the epigastrium, tormina, scanty urine, and a very low pulse—only 48. A compress, on which nearly a drachm of chloroform had been poured, was placed on the umbilical region, and retained there for several minutes. In spite of the sensation of heat and burning occasioned, immediate relief was experienced by the patient. In addition to this, a sulphureous bath was ordered; a mixture containing 30 drops of chloroform was administered; and a domestic enema was prescribed, to be followed by a small clyster, with 20 drops of the anæsthetic in it. This treatment was continued for a week with great benefit, the chloroform being given morning and evening; and sixteen days after admission the patient was discharged cured. Rather an interesting incident occurred in this man's case; he swallowed, one day, by mistake, nearly an ounce (30 *grammes*) of chloroform. Symptoms of narcotic poisoning appeared, but the patient recovered satisfactorily. Several other cases are given, in which the same treatment proved very efficacious.

M. Aran says that the compress saturated with the chloroform should be covered with dry compresses, and that it should be allowed to remain in contact