

If the dose were pushed beyond 3 grammes, symptoms analogous to poisoning by carbolic acid were observed; whilst the lowering of temperature only lasted a short time, to be succeeded, in from one and a half to two hours, by increase of fever and temperature, to even a higher degree than before. The nausea was also very objectionable. It might be suggested that, as small doses lowered the temperature for a time, larger doses could be administered to lengthen the effect; but against this is the fact that resorcin is excreted as ether and sulphuric acid, and only a part is further oxidized and forms coloured products of oxidation. Hence, as resorcin is administered, the body becomes poor in sulphuric acid, and receives bodies which act as poisons on it. As an antipyretic, therefore, this drug is not to be recommended on any account. It has also been lauded in intermittent fever; but, as in well-constructed hospitals this fever is observed to pass over favourably without medication, Brieger has not administered resorcin to the patients. He has used the other agent chinoline, without the slightest effect in typhus, pneumonia, rheumatism, and remittent fever; it being in some cases vomited, thereby probably reducing the temperature very slightly. It has also bad effects following its administration, *e. g.*, disturbances of digestion, vomiting, and nausea; so that it does not seem advisable to use chinoline in its present form. Hiller has made similar observations, which were extended to phthisis and enteric fever, with like results, using the tartrate of chinoline, which is very insoluble and of a very disagreeable taste, producing vomiting in three-fourths of all the patients to whom it was given; he has therefore abandoned it. Guttman used resorcin as a wash for the bladder in chronic cystitis in three patients, in whom it caused intense pains and hæmaturia with renal elements, which at once ceased when salicylic acid solution was used. He trusts that such washings-out with resorcin will never be undertaken again. Brieger, lastly, is astonished that Soltmann recommends it for children with stomacic ailments.—*London Medical Record*, April 15, 1882.

#### *Detection of Small Amounts of Iodoform and Substances Yielding Iodoform.*

On heating an alkaline solution of resorcin with even very small amounts of iodoform a red coloration is produced which again disappears on the addition of an acid. This reaction may be readily employed for the detection of small amounts of substances yielding iodoform, as alcohol, acetone, etc. As is known, such substances are recognized by warming the liquid to be examined, adding a solution of iodine in potassium iodide or potassium carbonate, and then sufficient solution of sodium hydrate, drop by drop, until the brownish-yellow colour is nearly discharged. On agitation and standing, the iodoform separates as a bright yellow crystalline precipitate, which, under the microscope, appears in the form of regular six-sided tables of roundly-pointed laminae. As on the one hand small amounts of iodoform remain dissolved, particularly in alcoholic liquids, and on the other hand the microscopic examination of the precipitate is somewhat circumstantial, it is recommended to gently warm the liquid containing iodoform, obtained by the above method, with the further addition of alkali and a little resorcin. The above-mentioned characteristic red coloration of the liquid then appears.—*Cincinnati Lancet and Clinic*, April 29, 1882, from *Pharm. Centralhalle*.

#### *The Convulsive Properties of Morphia.*

The *Gazette Hebdomadaire* contains an interesting note by MM. GRASSET and AMBLARD on the convulsive properties of morphia. Opium contains, as is well known, two series of alkaloids of very different properties, of which thebain and morphia are types. In certain points of view, however, the physiological re-

sults produced by these alkaloids are not entirely dissimilar; for example, it has been found that morphia, as well as thebain, may possess convulsive properties when given to cold-blooded animals. MM. Grasset and Amblard have found an analogous result in the warm-blooded animals; when one or two centigrammes are injected hypodermically, slight transient convulsions are produced before sleep occurs. When larger doses are given, these transient convulsions are succeeded by a generally calm sleep, during which, half an hour or an hour after the injection, isolated contractions occur, which may pass into a form of clonic convulsion, with marked flexion of the body, occurring at each inspiratory movement. These results seem to indicate that the excito-motor effects produced by preparations of opium may not only be due to the convulsive alkaloids, but also to those which are generally regarded as soporific.—*Revue Scientifique*, March 25, 1882.

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#### *The Effect of Bleeding on Inflammation.*

The effect of local abstraction of blood in relieving local inflammation is one of the ancient doctrines of therapeutics which is still unrefuted and still unexplained. It was formerly held that the result was produced by a perfectly simple *modus operandi*. By the removal of blood from the surface the vessels of the deeper inflamed parts were partly emptied; but it was later recognized that this explanation is incompatible with the known conditions of the circulation. The local removal of blood never produces a lasting effect on the circulation in the part. At the present time it is generally assumed that the effect of local depletion is to remove the inflammatory stasis, although such an effect has never been demonstrated experimentally; and, moreover, the idea of a derivatory action still haunts the theory of the subject, while the effect is sometimes ascribed to the influence of the depletion on the whole mass of blood. The question has been lately subjected to experimental investigation by Genzmer and Nikolaus of Halle, and the results obtained have been described by the former in the *Centralblatt für d. Med. Wiss.* In the web of the foot of curarized frogs foci of inflammation were excited by punctiform cauterization, either by nitrate of silver or a red-hot needle, and the process was watched with the microscope. When the well-known phenomena of inflammation made their appearance, the aggregation and exit of the white corpuscles, retardation of the blood-current, and, finally, the formation of stasis, a leech was applied to the leg. As soon as the leech began to suck, a striking change occurred in the inflammatory process in the foot. The blood-current became quickened, and carried on the corpuscles which were adherent to the wall. The stasis passed away, and in a few minutes the inflamed capillaries were cleared, and presented to the end of the experiment a normal and even accelerated circulation. Whether the corpuscles which had already wandered out of the vessels were influenced by the abstraction of blood could not be with certainty determined. In some experiments scarification was employed after the focus of inflammation had been excited. The effect was less conspicuous, since the loss of blood did not occur with the same vehemence as with a leech, although the amount of blood abstracted was nearly the same. The effect of abstraction of blood from the general circulation, by opening an abdominal vein, was still slighter, although the amount of blood taken was considerable. The conclusion drawn from these experiments is that the antiphlogistic action of local abstraction of blood is produced by a purely mechanical agency. A temporary augmentation of the circulation occurs, by which the capillaries are cleared; and the stasis, which is the first step in a local necrosis, is removed. Not only is no local anemia produced, but there is actually an arterial hyperæmia; there