

**MATERIA MEDICA, GENERAL THERAPEUTICS,  
AND PHARMACY.**

10. *Jaborandi, a new Sudorific and Sialogogue.*—Recent French journals (*Revue Scientifique*, April 18, *L'Union Médicale*, April 14 and May 9, and *Gaz. Hebdom.*, April 10) contain notices of a new and powerful sudorific and sialogogue brought to Paris by Dr. S. COURTINHO, of Peraambuco. This new therapeutic agent is the leaves of a shrub growing in Brazil, the botanical characters of which have not yet been satisfactorily established. M. RABUTEAU, who has made a chemical analysis of these leaves, and experimented upon their physiological properties, failed to attain any evidence of an alkaloid in these leaves, or the presence of any organic base. The quantity of leaves furnished Mr. R. was so small that he could not carry his investigations as far as he desired, and awaits a further supply to enable him to continue them. All of the leaves which remained weighed 2.90 grammes, and these Mr. R. reduced to powder, and about 10 o'clock in the evening of the 6th April, he prepared a teacupful of an infusion of them, which he took when nearly cold; one-half of it alone, the other half with the addition of a little sugar; this addition was not, however, necessary, as the taste of the infusion was not disagreeable. Tea or fifteen minutes after he had taken the medicine, Mr. R.'s forehead became moist, and he went to bed. Sweating speedily came on, and at the same time profuse salivation, which continued for nearly two hours. There was scarcely any abnormal heat, nevertheless the temperature was highest when the effects of the medicine were most active—three-quarters of an hour after taking the infusion. After changing his wet shirt, Mr. R. slept well.

Mr. R.'s latest experiments show that the bitter substance of the jaborandi is the active sialogogue and sudorific principle; and that the sialogogue effects are most readily manifested, since they are most marked when the active principle has been taken in a very small dose; and, finally, that when the dose is larger, the sudorific effects are increased.

M. GUBLER has also tried this drug at the Hôpital Beaujon, and reports that it has always acted as a powerful diaphoretic and sialogogue. Its action becomes evident a few minutes after it has been taken, and almost with certainty. Very soon after it is administered, the sweat rolls down the face and the whole surface of the body. The saliva flows in such abundance that articulation becomes almost an impossibility; as much as a pint and a half has been collected in less than two hours. At the same time the bronchial secretion has been observed to increase, and in one or two cases diarrhoea supervened. It is a remarkable fact, that the employment of heat, as M. Courtinho has remarked, has but a slight influence in the production of the sudorific effects of jaborandi. Whilst it is of paramount importance where our indigenous sudorifics are concerned, it is certainly not unavailing to administer jaborandi in a very hot infusion, and to cover the patient up warmly in bed; but these conditions are by no means necessary to develop the power of the new sudorific. Thus in one experiment, a person, who is by no means subject to sweatings, produced a copious perspiration in himself, by taking a glass of jaborandi scarcely warm, while he was going about his ordinary business. M. Gubler believes that a great future is in store for this new remedy, which he considers to be the first incontestable specimen of a diaphoretic truly worthy of the name, that is to say, of a medicament having the power of directly inducing the secretion of sweat by an elective action—by a special stimulation of the sudoriferous apparatus. The form of administration is from four to six grammes of the leaves in a cup of warm water, or if given in cold water the same results ensue.

11. *On Eucalyptus and its Febrifuge Qualities.*—Dr. E. BURDEL, Physician to the hospital at Virgou, records in the *Revue des Sciences Médicales*, April, 1874, the results of his observations on the action of eucalyptus in the Sologne. In the note under consideration, upwards of thirty-three cases are reported, in which eucalyptus was successful in eighteen instances. M. Burdel believes

that he can now, after two years' experience, by bringing together the facts which have occurred under his observation, arrive at the following conclusions with regard to the employment of eucalyptus.

The action of this remedy, which may certainly be considered a schrifage, is slow and far from being always constant. In mild intermittent fever, eucalyptus is successful in four-fifths of the cases; in tertian, in three-fifths only; and, finally, in quartan fevers, it almost entirely fails: that is to say, in eight-tenths of the cases. In the seasons when intermittent fever is most frequent—that is to say, endemic—relapses are much more common when eucalyptus is used than when recourse is had to quinia. Relapses may, however, be avoided by administering eucalyptus more frequently after some days' rest only, and in as large doses as the stomach will tolerate. This remedy is perfectly inert in palustral cachexia. Finally, M. Bardel believes that in the second year of his experiments he obtained a rather larger proportion of cures and a smaller number of relapses, because he gave the eucalyptus in conjunction with good wines, iron, and quinia, and kept the organism up to its work by frequently repeated doses. Dr. Bardel administered the alcoholic extract of eucalyptus in pills, each containing 15 centigrammes, to the number of from four to ten daily, according to the form of the fever, given twice during the day.—*London Med. Record*, May 13, 1874.

12. *Action of Chloroform*.—Dr. POLLAK gives the following as his conclusions on this subject:—

1. Chloral is a very good hypnotic, and in all those diseases which consist in abnormal cerebral excitement, or are combined with this, it by its soporific influence constitutes a good culmiog medicoe. 2. It relieves pain by the fact of inducing sleep, but will not relieve pain without causing sleep. In very intense pain it exerts but little hypnotic effect, and in such cases is advantageously combined with morphia. 3. As it induces relaxation of muscles, both voluntary and involuntary, it is an excellent means in the various forms of spasm. 4. In disease of the heart and lungs and of the digestive canal, chloral is without effect or unsuitable or even dangerous, and consequently is contraindicated, or should only be employed with caution. 5. It does not admit of being used as an anæsthetic during the execution of the great operations. 6. Its prolonged employment is not usually attended with any disagreeable effects, and if any occur, they are not of any consequence. It especially does not induce congestion of the brain or disturbance of the digestive and nutritive processes. 7. It is in most of the diseases in which it is employed an excellent palliative, but on the disease itself it usually exerts no influence. Chloral is especially indicated in the cases in which morphia is indicated, and when the latter on account of some of its effects cannot be administered. It is contraindicated in diseases of the heart and lungs and of the digestive canal. 8. Comparing chloral with morphia and chloroform, we may assert (1) that as a soporific agent its operation is more certain and less disagreeable than is that of morphia, which it will succeed in displacing as a hypnotic; (2) that it only relieves pain by inducing sleep, and fails to remove intense pain, so that as an anodyne it cannot supersede morphia; (3) and that as an anæsthetic it is far inferior to chloroform both in rapidity and intensity. 9. Although chloral has rightly obtained admission into the *Materia Medica*, it has not yet acquired its definitive place. Notwithstanding the numerous communications that have been made respecting it (the author is cognizant of the writings of 312 authors upon the subject), much more has yet to be worked out respecting its chemical, physiological, and therapeutical relationships before the "chloral question" can be said to be completely settled.—*Med. Times and Gazette*, April 11, from *Wiener Med. Woch.*, Feb. 28, 1874.

13. *Studies on Ether and Chloroform*.—Dr. T. G. HAKE gives (*The Practitioner* April, 1874) an interesting account of the observations made by Prof. SCHIFF, of Florence, on the action of ether and chloroform. These observations, though instituted solely for the advancement of physiological science, have a direct practical bearing on surgical practice. Prof. S. states in his