

tism. In general sepsis, or when inunctions are not practicable, it may be given internally as a pill: soluble silver, $\frac{1}{4}$; sugar of milk, $1\frac{1}{2}$ gr.; glycerin, $1\frac{1}{2}$ m., with sufficient water. Two of these may be administered twice or thrice daily, followed by from three to six ounces of boiled water or tea. These are suggested as being tonic, do not interfere with digestion, and in addition to sepsis may be of use in tuberculosis. Pencils of three grains each are useful for fistula. In solution, 1 or 2 to 10,000, it may be used for irrigation. Of the strength of 1 to 500-2000, in severe sepsis it can be administered intravenously after the method employed by Baccelli for mercurial solutions. Several patients have been under observation who have received fifteen grains of this substance daily for weeks without unpleasant after-effect or the appearance of argyria.—*Klinisch therapeutische Wochenschrift*, 1898, Nos. 14, S. 460, 15, S. 495.

[This allotropic form of silver has been known to photographers, notably H. Carey Lea, for many years. From the therapeutic stand-point it has a peculiar interest. Several months ago a hospital patient who presented numerous pustules upon the cheek and neck, the result of a suppurative otitis media, was entirely relieved by the use of the ointment, even before the ear was cured. We are of the opinion that this substance merits further investigation.—R. W. W.]

The Abortive Treatment of Erysipelas.—DR. LABIT recommends a 10 per cent. solution of iodol in collodion. The affected area is thoroughly painted with this and the coat extended for an inch over the healthy skin. If the hairy scalp is invaded, it is first carefully shaved, then painted. That the iodine contained in the iodol is absorbed is shown by its appearance in the urine. Frequently within twenty-four hours all symptoms of the disease will disappear. It is not claimed that iodol is the only specific for the streptococcus of Fehleisen; doubtless other antiseptics can produce the same result. The pressure produced by the collodion, and its penetration, carrying with it the remedy into the tissues, is important. The method is not painful, but, on the contrary, is anodyne. The results tend to show that at first the disease is local, and, since this is so, no general treatment has been employed.—*Bulletin Générale de Thérapeutique*, 1898, 14e liv. p. 540.

The Action of Organs upon Strychnine.—M. H. ROGER takes as his text the well-established fact that different parts of the organism possess the property of arresting alkaloids, modifying them, and diminishing their toxicity; in fine, of exercising a protective action against poisoning. The results of his experiments show that strychnine is about three or four times less poisonous when it is passed through the lungs than when it enters directly into the systemic circulation, as when injected directly into the aorta. This is, however, a special instance of a general law, for the function designated as antitoxic is not the exclusive property of a single organ or tissue. While all the organs, tissues, and cells may be capable of combating intoxication, there are certain parts of the organism which, because of their activity or their situation, are of principal importance. For instance, if a poison is introduced into the alimentary canal it is modified by the intestinal epithelium; if it passes this barrier it finds in the liver a most efficient protector

of the organism. In fact, in this respect no other organ compares with it. If, however, some portion of the poison has escaped its vigilance it is carried by the blood current into the lungs, whose protective action has been mentioned above. As it passes through this organ it is then distributed throughout the economy. If, on the other hand, absorption takes place from the peripheral veins, that is from subcutaneous injection, the liver acts too late, and it is the lung, the first organ traversed, upon which devolves the rôle of protector. This function of the lung deserves further study.—*La Presse Médicale*, 1898, No. 32, p. 185.

The Treatment of Bradycardia.—DR. R. DOUGLASS POWELL points out that one form sometimes follows upon the rapid heart of exophthalmic goitre. It is very commonly associated with well-marked myxœdema, and may continue, notwithstanding the disease has been cured or held in check by thyroid treatment. When found in epileptics the rhythm is not only slow, but frequently irregular. As a temporary condition it is not infrequently met with as a sequel to influenza, and also in association with the stage of depressed temperature that frequently follows upon other fevers. Chronic high arterial tension is generally associated with a slow, sometimes very slow, pulse, whereas in acutely raised tension the action of the heart is generally quickened. In chronic bradycardia, a condition that tends to remain permanent and does not necessarily shorten life, an occasional twenty-four hours' rest in bed should be enjoined, and for mental work the recumbent posture should be preferred. In the more temporary variety the combination of atropine with an alkali or potassium iodide (the two drugs being kept in separate bottles) is a very useful one. Caffeine also may be employed, especially if the urine is scanty. A five-minute inhalation of oxygen three or four times daily is a valuable cardiac stimulant. In myxœdema thyroid extract will be given, but it is not wise to push it to the production of any excitement of circulation.—*British Medical Journal*, 1898, No. 1943, p. 805.

Acetylene; the Dangers Arising from its Inhalation.—DR. THOMAS OLIVER has directed his experiments toward an investigation of the poisonous properties of this new illuminant, when inhaled, as compared with coal-gas. In the latter death supervenes by asphyxia, owing to the carbon monoxide, so largely present in this gas, entering into stable combinations with the hæmoglobin of the blood, from which it is with difficulty dissociated. If a rabbit is placed in a bell-jar into which ordinary air and acetylene are pumped, the animal seems for a very long time to experience very little inconvenience. It is not until ordinary atmospheric air is excluded and only acetylene admitted that symptoms gradually and slowly develop. This circumstance shows that so long as there is any oxygen in the aerial medium by which the animal is surrounded, it is the oxygen which is absorbed in the blood, and very little acetylene. After a more lengthened exposure to acetylene than that which is necessary for coal-gas, the animal becomes intoxicated, it falls over on its side, apparently profoundly asleep, and while all through the experiment its breathing has been somewhat short and rapid, stupor steals over the animal, apparently painlessly, for there is not exhibited anything of the excitement, nervous or respiratory, which is seen in the narcosis produced by