

**Belladonna in the Bronchopneumonias of Children.**—**DR. D. A. HONG-HEAD** recommends this for the following reasons: (1) In small doses it is mildly narcotic, producing a slightly sedative influence on the nervous system. (2) It is, in small doses, a heart tonic, raising the arterial tension and increasing the circulation by stimulating the cardiac sympathetic, and in a corresponding manner depressing the pneumogastric, the inhibitory nerve. (3) It is a respiratory stimulant. (4) It produces a dilatation of the superficial capillaries, and in a corresponding manner relieves the congested lungs. It produces an increased secretion of urine and bile. (5) The most important action in this relation is that it diminishes secretion in the bronchial tubes and pulmonary tissues. To be effective it should be given every hour or two, in quite large doses, until the desired results are obtained. Children are not very susceptible to the drug, and infants a few months old will prove no more sensitive to the same dose than children of five and six years. It is more useful when the disease is well developed and the bronchial secretions are superabundant.—*Pediatrics*, 1899, vol. viii, p. 214.

**Results of the Antitoxin Treatment of Diphtheria in Prussia.**—**DR. EDWARD F. WILLOUGHBY** reports that from 1885 to 1894 the death-rate from this disease averaged 15.5 per ten thousand of population, but it fell in 1895 to 9.0, in 1896 to 7.6, and in 1897 to 6.2. This startling phenomenon admits of but one explanation—viz., that while the treatment of this disease by antitoxin had previously been only partially adopted even in hospitals, its value was then so generally recognized that the government made arrangements for providing an unlimited supply of the serum, and its use has ever since been extending, not only in hospitals and in private practice, but scarcely less so in that of the poor-law medical men. Pointing out that improved sanitation has aided in lowering the death-rate, the total diminution cannot be ascribed to this alone. In answering the objection that the fall has not been uniformly marked when districts are considered individually, he shows that this method, the success of which depends on its being begun at the earliest possible day after the commencement of the disease, has a far better chance among intelligent, thrifty, industrious, and, on the whole, clean and well-to-do people; and its failure to so markedly lower the death-rate among people possessing the characteristics opposite to these may be ascribed to the delay of a poor, ignorant people in seeking medical advice and the prejudice with which such persons everywhere regard "vaccinations."—*The Therapist*, 1899, vol. ix, p. 174.

**Ichthalbin for Diseases of Children.**—**DR. TH. HOMDURGER** recommends this as a substitute for Ichthyol, which, although efficacious therapeutically, is objectionable because of its taste and odor. For children under six months the dose varies from one to one and one-half grains; at six months, two and one-half to three grains; reaching the maximum of five grains at the second year, thrice daily. At five, seven grains, and at ten years fifteen grains suffice. If mixed with an equal part of chocolate it is easily taken. Long-continued observation demonstrates that the remedy is harmless and can be taken internally without repugnance. Moist eczemas are dried within a few days, and that when external remedies alone were unsuccessful. In con-

junction with customary external remedies the healing of dry eczema is hastened; so also is the furunculosis of weak children. In chronic pneumonia, scrofulosis, and chronic intestinal catarrh the appetite is improved and the body-weight increased; on the other hand, in acute catarrh the results are not so striking.—*Therapeutische Monatshefte*, 1899, Heft 7, S. 361.

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## GYNECOLOGY.

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UNDER THE CHARGE OF

HENRY C. COE, M.D.,  
OF NEW YORK.

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**Metrorrhagia of Ovarian Origin.**—BOUILLY (*La Gynécologie*, June 15, 1899) calls attention to the peculiar features of uterine hemorrhage due to cystic degeneration of the ovaries without accompanying salpingitis. It appears first as an ordinary menorrhagia, but in time the flow becomes intermenstrual, and often continues throughout the month, until the resulting anemia is extreme. The ordinary methods of treatment—hæmostatics, hot injections, intra-uterine applications, and tampons—have little or no effect. Curettement, though often repeated, does not check the flow, since it is not due to the ordinary hyperplastic endometritis. Since pain is frequently absent, the relation of the metrorrhagia to the ovaries may be entirely overlooked unless a careful examination is made, with the view of discovering moderate enlargement of these organs.

**Gynecological Operations in the Insane.**—PICQUÉ and FERRÉ (*La Gynécologie*, June 15, 1899) report a series of successful cases in which operations were followed by either a cure or marked improvement in the mental condition. In no instance was a healthy organ removed, the indications for interference being the same as in sane patients. Great care was exercised in selecting cases to exclude those in which, from the hysterical tendency of the subjects, there was reason to apprehend post-operative psychoses. The writers insist that judgment must be used in the selection of proper cases, since some patients will only be rendered worse by the operation.

**Ligation of the Uterine Arteries in Cancer of the Uterus.**—LOEWY (*La Gynécologie*, June 15, 1899), in a communication addressed to the Paris Anatomical Society, criticises the operation from an anatomical stand-point, showing that it does not retard the progress of the disease. When the disease is in the operable stage hysterectomy is always preferable, and, if that is impossible, curettement and canterization offer a better prospect of arresting the hemorrhage than ligation of the uterine arteries.

**Interstitial Suppuration in the Cancerous Uterus.**—KEIFFER (*La Gynécologie*, June 15, 1899) reported to the Belgian Society of Pathological Anat-

omy the results of experiments in which he injected fluid into the tissues of cancerous uteri. Without pressure the fluid at once oozed from the ulcerating surface. Sections through the organs showed that the muscular tissue which appeared to be healthy was generally infiltrated with leucocytes, while the vessels were destroyed. The reason why patients with this condition do not suffer from profuse and fatal hemorrhages is doubtless due to the frequent spasmodic contractions of the muscular tissue.

**Ovarian Extract in Epilepsy.**—TOULOUSE and MARCHAND (*La Gynécologie*, June 15, 1899) report five cases of epilepsy which seemed to be directly dependent upon amenorrhœa or the climacteric, one being post-operative. No ill effects followed the use of the remedy, while the diminution in the number and severity of the epileptic attacks was marked. Two young women who had long suffered from amenorrhœa menstruated within five weeks after the treatment was begun. The report is in general favorable.

**Stypticin in the Treatment of Uterine Hemorrhage.**—NEDERHOFF (*Bibliotheca Wratcha; La Gynécologie*, June 15, 1899) reports twenty-six cases in which the drug was used in the treatment of hemorrhage due to various causes. He began with less than a grain, increasing the dose to six grains. If administered hypodermotically, from one and one-half to two grains were used daily. No bad effects were noted in any instance. The writer concludes that stypticin has a distinct hæmostatic action, especially in metrorrhagia, which is not due to the inciting of uterine contraction. It seems to act rather upon the central nervous system (vasomotor). Stypticin is a pure hæmostatic, and has no effect on the morbid condition which causes the hemorrhage.

LAVIALLE and RUYSEN (*Der Frauenarzt*, June 16, 1899) think that stypticin is closely allied to hydrastoin in its physiological action upon the central nervous system. Its hæmostatic effect is doubtless due to lowering of the arterial pressure, so that the formation of thrombi is favored. Excessive doses in animals cause complete muscular relaxation and slowing of the respiration, followed by overstimulation and death from tetanus.

**Primary Cancer of the Vulva.**—SAND ("Inaugural Dissertation," *Centralblatt für Gynäkologie*, 1899, No. 27), from a study of cancer of the vestibule, arrives at the conclusion that trauma is the starting-point of the disease. He believes that masturbation is one of the most frequent causes.

FRANCKE (*Virchow's Archiv*, Band cliv.) analyzed twenty cases of malignant disease of the external genitals, four being primary.

KOPPERT (*Centralblatt für Gynäkologie*, 1899, No. 27) reports twenty-five cases of primary cancer of the vulva from the Jena clinic. He finds that the disease begins most frequently in the labia majora and vestibule, epithelioma being the prevailing type. The condition of the vaginal glands is of vital importance. Those about the seat of the growth should be removed at the time of operation if they are enlarged. Pruritus is the most common symptom in the incipient stage.

The prognosis is very unfavorable. Thorough excision of the growth and affected lymph-glands offer the only means of relief.

## OBSTETRICS.

UNDER THE CHARGE OF

EDWARD P. DAVIS, A.M., M.D.,

PROFESSOR OF OBSTETRICS IN THE JEFFERSON MEDICAL COLLEGE; PROFESSOR OF OBSTETRICS AND DISEASES OF INFANCY IN THE PHILADELPHIA POLYCLINIC; CLINICAL PROFESSOR OF DISEASES OF CHILDREN IN THE WOMAN'S MEDICAL COLLEGE; VISITING OBSTETRICIAN TO THE PHILADELPHIA HOSPITAL, ETC.

**A Case of Repeated Cæsarean Section, with Transverse Incision.**—In the *Centralblatt für Gynäkologie*, 1899, No. 27, LUDWIG reports the case of a patient upon whom Cæsarean section by transverse incision had been practised because of a rhechitic pelvis. The result of the first operation was successful, the patient making a good and rapid recovery. She soon afterward became pregnant, and the same operation was repeated at full term.

Upon opening the abdomen eight adhesions were found between the parietal peritoneum and the mesentery, and a very slight adhesion between a small bit of mesentery and the fundus of the uterus. The womb was opened in the old scar, and the child and placenta were easily extracted. There was very little bleeding; the uterus contracted well, and the patient made a rapid recovery.

This case gave opportunity to examine the conditions existing after this form of Cæsarean section. It was interesting to observe that there were no adhesions between the anterior surface of the uterus and the abdominal wall, and the womb could be opened in the scar of the first operation without difficulty.

**Wounds of the Fœtal Eyes Occurring During Labor.**—In the *Centralblatt für Gynäkologie*, 1899, No. 27, CAAMER contributes a paper upon this subject.

He reports the case of a multipara who had a contracted pelvis complicating disease of the hip-joint. Labor was induced, the forehead presented, and the forceps was applied as well as possible to the sides of the head, the edges of the blades bearing upon the outer edges of the orbits. The child was delivered with considerable difficulty.

Soon after its birth bleeding occurred from the left eye. Upon examination a depressed fracture of the left side of the forehead was found, and crepitation was discovered about the middle of the left orbital arch. Upon opening the eyelids the cornea soon collapsed, and the fracture of the outer table of the skull had apparently torn the sclera. Under antiseptic precautions these wounds healed without infection. The eye, however, was lost through absorption of its liquids and collapse of the chambers of the eye.

The writer quotes the principal papers extant upon the subject, which show the accident to be a rare one. It is ascribed in this case to the contracted pelvis, the unfavorable presentation, and the necessity for applying the forceps in the manner described.

[The editor recently had under observation in the Jefferson Maternity a case of hemorrhage from the conjunctiva, which at first sight was engorgive

of possible traumatism. On examination, however, this was found to be impossible, and the reason for the hemorrhage was evidently in the condition of the child's blood. The case was referred to an ophthalmologist, and the child ultimately recovered with the preservation of the eye. A similar accident to the one reported by the writer is sometimes seen after version in highly contracted pelvis. It is, however, rare in these cases, and should very seldom happen under the use of the forceps.]

**A Study of Fœtal Development by Means of the Röntgen Rays.**—In the *Centralblatt für Gynäkologie*, 1899, No. 34, BANE gives the results of the examination of ten specimens to determine the length and development of the fœtus at different periods of gestation. The Röntgen rays were used to determine the presence or absence of bone. The period of development of these specimens varied from eight to ten weeks.

The first specimen was but 3 cm. long, and weighed 2 grammes. There was no trace of bony tissue on using the Röntgen rays. The second specimen was 3.4 cm. long, and here faint shadows were obtained of the cranium, the upper and lower jaw, the clavicle, the upper extremities of the humerus, radius, and ulna, the lower extremities of the thighs, and some of the first ribs. In the third and fourth specimens the same portions of the skeleton were found as in the second. This was a case of twin embryos, and in addition traces of the vertebrae could be observed. The fifth was 7.1 cm., and showed less signs of ossification than in the preceding. The sixth was 9 cm. long, and the formation of bone was far advanced, especially in the fingers and skull. Faint traces of the bones of the ears could be seen. The seventh, eighth, and ninth, whose lengths were greater by 1 cm., showed formation of bone in the pelvic bones, and a better development of the shafts of the long bones. The tenth specimen was 14.5 cm. long, and gave shadows of all the skeleton except the third, fourth, and fifth tarsal phalanges, and was also remarkable for the narrowness of the bodies of the vertebrae.

**Rupture of the Uterus and Hysterectomy.**—At a recent meeting of the Obstetrical Society of Vienna, LUDWIG showed a patient who had recovered from rupture of the uterus, treated by hysterectomy (*Centralblatt für Gynäkologie*, 1899, No. 34). The patient was a multipara, and was in labor, with breech presentation. The physician in charge attempted to extract the child by pulling upon the feet, when the head became separated from the trunk. On admission to the clinic an extensive rent was found in the lower part of the uterus. Abdominal section and hysterectomy were at once performed, the patient making a good recovery.

In the discussion Schauta stated that he had performed a number of these operations, with unsatisfactory results. He ascribed death in these cases to septic infection, and stated that if this were present the patient would surely die, whether operated upon or not. A second danger was hemorrhage, which could usually be controlled.

Chrohak ascribed death in these cases to anæmia following hemorrhage, and not to septic infection. Brann had not seen good results following abdominal section, and had ascribed death in such patients to anæmia and sepsis together. Rapid heart-failure was usually seen. Ludwig regarded

the recovery of the patient as remarkable and most satisfactory, in view of the fact that she was carried a long distance to the hospital and that the intestines were found in the uterus and had undergone considerable compression through uterine contraction.

## DERMATOLOGY.

UNDER THE CHARGE OF

LOUIS A. DUHRING, M.D.,

PROFESSOR OF DERMATOLOGY IN THE UNIVERSITY OF PENNSYLVANIA.

AND

MILTON B. HARTZELL, M.D.,

INSTRUCTOR IN DERMATOLOGY IN THE UNIVERSITY OF PENNSYLVANIA.

**The Nosological Value of Eosinophilia and the Elimination of Eosinophilous Cells by the Skin.**—LEREDDE (*Annales de Dermatologie et de Syphiligraphie*, 1899, No. 4), at a recent séance of the Société Française de Dermatologie et de Syphiligraphie, expressed the opinion that the existence of eosinophilia associated with the excretion of eosinophilous cells by the skin—the union of the two being necessary—was proof that pemphigus foliaceus and pemphigus vegetans are forms of one and the same blood disease, the type of which is the dermatosis of Duhring. These affections are only skin diseases secondarily; they are essentially forms of a blood disease due to the reaction of the hæmatopoietic organs, especially of the bone-marrow. This reaction may be produced under the influence of multiple intoxications of heterogeneous or endogenous origin, transient or lasting.

**The Cutaneous Para-tuberculosis.**—J. C. JOHNSTON (*Journal of Cutaneous and Genito-Urinary Diseases*, July, 1899) concludes from his studies that there exists a class of cutaneous diseases analogous to the para-syphilodermata, which may be designated para-tubercles. They are not in themselves tuberculous, but they develop and flourish on a tuberculous soil. They may be divided into three groups: scrofuloderms, tuberculoderms, and dyschromias. The scrofuloderms are pure pyoderms, by which characteristic they are separated from the tuberculoderms, which are only accidentally pustular. The tuberculoderms include a variety of infections, ranging from erysipelas perstans to lichen scrofulosorum, which are toxæmias. The points upon which the right of a disease to admission to this category rests are as follows: absence of tubercle bacilli, occurrence in scrofulous patients, a pathological anatomy comparable to that recognized for tuberculosis, and, finally, experimental production of the disease by infections of tuberculin.

**On Chronic Primal Dermatitis.**—E. HEUSS, of Zürich (*Monatshefte f. prakt. Derm.*, July 1, 1899) describes a case of chronic dermatitis due to contact with primula officinalis. A characteristic feature of dermatitis due