

chlorate or nitrate, and antiseptics of the lower urinary tract, are those of choice. The objections to local treatment are obviated when strict antiseptics is obtained, and pain is not caused if the bladder is not distended. A warmed 2 per cent. solution of boric acid is unirritating.—*La Chirurgie contemporaine des Organes Genito-urinaires*, 1894, No. 5. p. 140.

#### RECTAL INJECTIONS OF CREOSOTE IN PHTHISIS.

DR. CH. ELOY presents the various formulas which have been proposed, considering as one of the best that of Tisné and Simon: Pure beechwood creosote 0.40, iodoform 0.005, salol 0.40, dissolved in pure olive oil, 10. The injection is to be made each day through a rectal tube, the patient being in the left lateral decubitus; the solution is to be warm; the injection must be made slowly, and carried as high as is possible. The absorption is rapid. When intestinal symptoms arise this method must be abandoned. No remedy is more difficult to manage than creosote, and the degree of tolerance is variable, even for the same individual.—*Journal des Praticiens*, 1894, No. 49, p. 559.

#### THERMODINE.

DR. SCHMITT describes this substance as occurring in white pointed crystals, without odor and almost tasteless, although upon trituration there is developed a special aromatic odor, and after some seconds, if a fragment is placed upon the tongue, a persistent bitter taste is perceived. It is slightly soluble in cold (1 : 2600), more easily in warm water (1 : 450); but readily in alcohol, ether, benzin, carbon disulphide, and chloroform. While physiological researches have demonstrated the harmlessness of doses, even relatively large, in healthy men, they have also determined its method of elimination. It is absorbed with the aid of the lactic acid of the stomach, is decomposed slowly in the economy into amidophenol, which is eliminated in the urine, probably also in the perspiration and possibly in the saliva. A small proportion, if the dose is large, may be eliminated unchanged. The dose employed at which anti-thermic effects have been manifest is between six and seven grains. On twenty-nine patients, suffering from typhoid fever, influenza, tuberculosis, articular rheumatism, and pneumonia, the effect was found to be a gradual fall of temperature, commencing generally within an hour after its administration; this fall is gradual, reaching its lowest point within about two hours. This point is retained up to the third or fourth hour, when the ascent takes place in the same regular and slow manner as the fall, and the initial degree is reached generally in from seven to nine hours after the administration of the drug. The extent of the fall of temperature depends somewhat upon the dose. Five grains in tuberculosis does not always give appreciable results. Eight grains are usually sufficient; tuberculosis is more easily influenced and with smaller doses than is typhoid fever, and pneumonic fever is less amenable to this drug. The pulse curve follows closely that of the temperature, although the pulse may be influenced later than the temperature as regards the diminution of the number of beats, but it is likely to become accelerated as soon as the temperature commences to rise. Sometimes the pulse-rate remains unchanged although there is a notable lowering of temperature. There have been no accidents in the use of this drug which