

of their use. They conclude: 1. Large injections (40 to 60 ounces) of sodium chloride, seven *per mille*, constitute an energetic treatment. 2. They should be made early and repeated, so that they will develop sustained general reaction and a modification of the general condition which can lead to recovery. Three of the four patients treated survived, although all appeared to be hopeless; the fourth, although in *extremis*, lived longer and was brought into better condition through this treatment. 3. There are no contraindications to this treatment, but care should be taken as to the quantity used and the rapidity with which it is injected. Too large injections are dangerous, and from one and one-half to three ounces each minute should not be exceeded.—*La Presse Médicale*, 1897, No. 51, p. 283.

Quinine in Uterine Inertia.—DR. H. A. HARE, in summing up the results of answers to inquiries addressed to eight prominent obstetricians, concludes that it is not a first-rate uterine stimulant, and that for this reason its ordinary contraindications are so great as to limit its oxytocic usefulness. It evidently only acts as a stimulant to the general system, as would alcohol or other drugs of similar stimulant power.—*Therapeutic Gazette*, 1897, No. 7, p. 433.

Treatment of Syphilis by Intramuscular Injections of Corrosive Mercuric Chloride.—DR. CARTIER makes use of the following formula: Corrosive mercuric chloride, 1; sodium chloride, 3; distilled water, 20; in dose of nearly one grain of the drug, which is injected into the retro-trochanteric region. This has not caused even the smallest abscess, although severe pain may occasionally be met with. Intramuscular injection should be the treatment of choice in that there is introduced into the organism a known amount of the drug in a condition to be fully utilized. The syphilitic manifestations yield rapidly, not only in severe cases, but in facial manifestations. The injections should be repeated every eight days, exceptionally in five, and four injections are sufficient to relieve the patient of contagious lesions, and six or eight for serious cases—those refractory to ordinary treatment or under unfavorable hygienic conditions.—*Revue de Thérapeutique Médico-Chirurgicale*, 1897, No. 11, p. 361.

Hæmato-catharsis in Broncho-pneumonia.—DR. E. HOUËL reports a single instance of the successful use of this method in a child, aged six months. Four ounces of a seven *per mille* solution of pure sodium chloride in boiled distilled water, under antiseptic precautions, were slowly injected in the scapular region. The following are offered for consideration: 1. Simultaneous injections of artificial serum, slowly made, are not contraindicated in pulmonary disease. 2. Age is not a contraindication. 3. Given at an early period of the disease, they increase the chances of cure; they are useful even in the last stages. 4. They seem to determine a crisis such as normally occurs (polyuria, diarrhoea, sweating, and amelioration of symptoms) with defervescence. 5. The administration is possible for rural physicians so long as the syringe can be sterilized. 6. It is important that asepsis should be obtained, so that there may be no recrudescence of the fever from septicæmia or abscess from septic hands. 7. If this method is employed in

extremis, it is likely that so good results will be obtained that physicians will not wait until the patient is *in articulo mortis*.—*Revue de Thérapeutique Médico-Chirurgicale*, 1897, No. 11, p. 357.

The Use of Hydrastis Canadensis in Bronchial Catarrh.—DR. M. SAENGER has found that in the early stages of acute attacks the remedy is useless, but so soon as the expectoration loses its mucous character and becomes muco-purulent or purulent it is of great value. In these cases it markedly diminishes the inclination to cough, lessens the expectoration, renders it less consistent, and aids it to return to its mucous character. The physical signs are also improved after the administration of the drug. The bronchial irritation is more promptly removed than by opium, and with no unpleasant after-effects. The modification of the expectoration is at least equal to that produced by other expectorants, and as an anticatarrhal remedy it is superior. The fluid extract is preferred in from twenty- to thirty-drop doses, four times daily, in sweetened water.—*Centralblatt für innere Medizin*, 1897, No. 17, S. 401.

Treatment of Catarrhal Diseases by Guaiacol Carbonate.—DR. NIED has treated twelve adult female patients, in age from twenty-three to seventy-five years. Some of these suffered from acute bronchitis and others from influenza. The dose varied from seven to thirty grains, twice daily. The effects were seen generally upon the second, latest upon the fourth day. The appetite returned, and then commenced an abundant expectoration of mucus, which ceased within fourteen to twenty days. The patients were discharged as cured in two or three weeks. Besides these six cases were treated, two of the ages of seventy-nine and eighty-one, who received fifteen grains of the drug twice daily for three weeks. Beneficial results were noted upon the third day. These very favorable results should encourage a further trial of the drug in acute bronchitis and other catarrhal diseases.—*Allgemeine Wiener Medicinische Zeitung*, 1897, No. 22, S. 244.

Nascent Ammonium Chloride in Pneumonia.—DR. JOHN ASHBURTON CUTTER reports a single instance of the use of this remedy, which was generated by shaking together two cloths, the one wet with strong ammonia and the other with commercial hydrochloric acid; the nascent ammonium chloride then appeared, like smoke, in the room, and was inhaled. The author believes that this substance is a germicide, and therefore destroys the parasites of the disease; the free ammonia is a tonic and stimulant to the lungs, the acid supplies the deficiency of chloride, and, finally, this method does not disturb the patient.—*Albany Medical Annals*, 1897, No. 7, p. 360.

Treatment of Gonorrhœa by Injections of Argonin.—DR. H. M. CHRISTIAN recognizes two conditions which are present: (1) The gonococcus, the exciting cause; and (2) the catarrhal inflammation of the mucous membrane resulting from destructive action of the gonococcus upon the epithelium; both must be considered in order to insure success. From the use of this remedy in eighty acute and ten chronic cases he concludes: 1. That it is absolutely nonirritating, and can be used in from 1 to 10 per cent. solutions.