

the nntitoxic treatment, used early, sn as to abort the disease by destroying its toxins.—*Medical Press and Circular*, 1900, No. 3181, p. 417.

DR. J. C. WALTON relies more on Nurwood's tincture of veratrum viride, two to four minims every two hours or oftener, watching its effect on the pulse, gradually bringing it down to 70 or 80 and holding it there until the disease is under control. In combination with ice it more nearly approaches a specific than any other treatment. Ice-bags constantly applied over the inflamed lung and over the heart, not only for their effect in reducing the temperature and in bringing down the pulse and respirations, but for their constringent effects on the capillaries, add much to the comfort of the patient and frequently abort the disease. If the treatment should fail to arrest the disease the subsequent stage is milder and more easily managed. If it goes into the second stage give ammonium carbonate, five grains every two hours, not only for its stimulating effect, but because it is the best absorbent which we have. By thinning and dissolving the tenuous secretion the patient is enabled to expectorate without difficulty, adding, when necessary, especially if the first sound of the heart is weak, alcohol. Strychnine is the best stimulant, and should be used freely when indicated. Digitalis is of great service when the pulse is weak and rapid. Transfusion of normal salt solution should be employed in extreme cases.—*Virginia Medical Semi-Monthly*, 1900, No. 3, p. 77.

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**Laryngeal Tuberculosis.**—DOTT. A. FASANO proposes the following by insufflation: Thiocol, 1; cocaine, 2; boric acid, 10. If the tuberculosis is primary the results are excellent.

DOTT. S. LODA recommends menthol, iodoform dissolved in ether, and cocaine, with which he obtains immediate relief from dysphonia.—*Gazzetta degli Ospedale e delle Cliniche*, 1900, No. 60, pp. 633, 634.

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**Apocynum.**—DR. T. B. MCGEE, mentioning the aids to digitalis in chronic cardiac disease, calls attention to this indigenous plant, stating that it is excellent in cardiac dropsy if a good preparation is employed. Large doses are apt to disagree, and small ones are preferable for diuretic action. One of its active principles—apocynin—appears to resemble digitalin in its effect upon the heart, so that the diuresis produced is evidently cardio-vascular in character, and it practically represents the diuretic principle of the drug. Apocynum causes no cumulative effects, and it will occasionally prove efficient in removing dropsical symptoms of cardiac insufficiency.—*American Therapist*, 1900, No. 10, p. 193.

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**An Iodized Serum.**—DOTT. A. SCLAVO notes the great importance of iodine, especially in the various manifestations of syphilis and of tuberculosis. Beside the preparations of iodine employed by various authors, he cites those produced by the combination of iodine and several proteid substances—*e. g.*, the action of Lugol's solution on egg-albumin, milk, peptone, and gelatin. By the action of iodine on blood-serum prepared aseptically he has produced an albumin-iodine preparation which may be administered hypodermatically or endovenously. Given in this form it is eliminated more slowly than when potassium iodide only is employed. In doses of from

two to four drachms or more, given subcutaneously, it is rapidly absorbed, without local or general disturbance. To the present time this has been experimented with in tuberculosis and syphilis with good results.—*Rivista Critica di Clinica Medica*, 1900, No. 14, p. 274.

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## GYNECOLOGY.

UNDER THE CHARGE OF

HENRY C. COE, M.D.,  
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**Condition of the Uterus after Extirpation and Transplantation of the Ovaries.**—RUNENSTEIN (*St. Petersburger med. Wochenschrift*, 1899, No. 31), as the result of experiments on rabbits, arrives at the conclusion that when the ovaries are transplanted and preserve their functions the uterus shows no evidences of atrophy, but when, on the contrary, they become atrophied the uterus undergoes the same changes as after castration—i. e., atrophy of the muscle and endometrium, thickening of the vessels, and general hypertrophy of the connective tissue.

This disposes of Sokolow's nerve theory, since after transplantation of the ovaries to a distant locality (in one instance to the mesentery near the spleen) there could have been no re-establishment of the nerve-anastomoses between these organs and the uterus. In order that the latter should not undergo atrophy it is only necessary that the ovaries should still remain within the body and should preserve their integrity.

In the writer's opinion the only satisfactory explanation is that based upon the theory of the internal secretion or trophic influence of the ovaries, which, although not absolutely established, is supported by so many clinical and experimental observations that it may be regarded as highly probable.

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**Exploration of the Abdomen as an Adjunct to Every Coeliotomy.**—KELLY (*Medical News*, December 16, 1899) calls attention to the importance of making a routine examination of the entire abdomen whenever the cavity is opened, since in this way unsuspected morbid conditions may be discovered when the attention is not directed entirely to the pelvic organs. Not only secondary deposits in cases of malignant or tubercular disease of the pelvis, but mechanical obstruction of the vascular, urinary, or alimentary channels may be detected. If this examination is negative both the operator and the patient have the satisfaction of knowing that no visceral lesion is present to retard convalescence or to menace life subsequently.

In conducting such an exploration strict asepsis should be maintained, preferably the use of rubber gloves with sleeves reaching to the elbows. A regular system is observed in palpating the different organs from the pelvis to the diaphragm.

There are three classes of cases in which this exploration is indicated—