

Emetin Hydrochloride.—ROBINSON (*Practitioner*, 1915, xcv, 544) has had very good results with the use of emetin hydrochloride for the treatment of pulmonary hemorrhage occurring in pulmonary tuberculosis. In mild cases, he gives a dose of two-thirds of a grain daily and continues its use for five days after the sputum has become free of blood. He has found that emetin hydrochloride has been uniformly successful in checking the hemorrhage in about three days. Similar results were obtained in controlling hemorrhage from gastric ulcer by Robinson. He cites a severe case of mucous colitis associated with dysmenorrhea, who was much benefited by emetin hydrochloride and hopes that others may be led to try the same treatment for similar conditions. Robinson has found that the sole drawback to the use of emetin hydrochloride is that there is a certain amount of local tenderness after subcutaneous or intramuscular injections. This, however, is not sufficient to prevent its daily administration for long periods.

Specific Treatment in Typhoid Fever.—GAY (*Jour. Lab. and Clin. Med.*, 1915, i, 13) summarizes the history of the specific treatment of typhoid fever. The first twenty years experience since 1893 with the use of ordinary preparation of typhoid vaccines administered subcutaneously gave some encouragement for the method in the matter of symptomatic improvement, shortening of the duration of the disease, decrease of the mortality, lessening of relapses and complications, with a few abortive cures. The results obtained were of doubtful value and inspired little confidence that the true specific treatment had been found. Modern investigations have introduced the intravenous administration of dead or living cultures and particularly of sensitized cultures of the typhoid bacillus. With such methods far more striking results have been realized. Abortive cures occur in a considerable percentage of cases, perhaps in as high as 30 to 40 per cent. If one working hypothesis is correct, these abortive cures are due to the presence of antibodies in a patient who is actively combating the disease, and cure is affected by the action of these antibodies on the circulating bacteria, combined with a specific hyperleucocytosis produced by the vaccine, particularly when it is specific and sensitized. The remaining cases might possibly be favorably affected by a combination treatment of sensitized vaccine and a suitable immune serum which would supply the lacking antibodies.

Concerning Exercise in the Treatment of Severe Diabetes.—ALLEN (*Bost. Med. and Surg. Jour.*, 1915, clxxiii, 743) says that tests were made first in diabetic dogs, with a known constant limit of tolerance for carbohydrate or protein. It was found vigorous exercise markedly raised the tolerance of such animals, as judged by the sugar in both urine and blood. In some experiments, dogs which for months past had regularly shown glycosuria whenever they were given 100 grams of bread, on exercise were able to take 200 grams of bread as a regular daily ration without glycosuria. The tests with patients are more recent, but the results thus far appear sufficiently favorable to warrant recommending exercise as an addition to the treatment of diabetes. Some of the severest cases are too weak for exercise at first, but it is begun as early in the period of dieting as practicable and generally