consultation with a medical friend, it was resolved to try a half ounce dose of the tincture. The patient had had a drinking bout, and suddenly became aggressive and destructive, tearing, pulling down, and burning, and striking and throwing things at the attendants. There was no loquacity: the patient rarely spoke, but sat in bed, rolling up the bedclothes, tearing off his clothing, and throwing food and drink in the faces of those who offered it. This he did with his dose of tincture of digitalis, after drinking one-half of it. The case was one in which the expectant treatment was thereupon tried with entire success—reason being restored and convalescence established within the week. Chloroform has been administered in very violent cases with advantage: when exhaustion is likely to come on from the constant raving and struggles of the patient, it may save life by saving strength. Such, however, are rare, and are more frequently met with as the result of heroic treatment than in the ordinary course of the disease.

"There were two or three cases of puerperal mania (so called) admitted into the Infirmary and Milnholm Asylum during the summer, and were treated on the same principles as the cases of delirium tremens. One of these brought to the infirmary had fallen into a raving delirium after taking morphia. They were, in truth, acute cerebral affections, of which parturition, or the puerperal state, was the exciting cause, and recovered within a short period. How far albuminuria is a cause or an effect of the morbid state of the encephalon, in this class of cases, has yet to be determined, although it is commonly assumed to be the cause. In none of the cases I have treated was there any important renal complication, nor was albuminuria detected, although the urine was carefully examined. Renal disease, especially albuminuria, is amongst the rarer complications of insanity."

18. Anaesthesia caused by Diseases of the Lungs.—M. Borchut long ago remarked the fact, that the approach of asphyxia in the latter stages of croup brought with it a condition of lowered, and finally of extinguished sensibility. He now produces examples of other diseases, to show that the law is a general one, that asphyxia is always accompanied, pari passu, by anesthesia; and this anesthesia is quite independent of any diminution of consciousness. The most interesting of his cases is that of a young man, a student, who was attacked with a most profuse and suffocating haemoptysis. During several hours he was in a condition of extreme asphyxia, and although his intellect remained clear, he had complete anesthesia, and curiously enough, even an erection of the penis and discharge of semen such as frequently occurs in persons who are hanged. The other examples cited of anosmia occurring in the course of respiratory affections, are cases of croup, capillary bronchitis, &c.—London Med. Rev., Oct. 1862, from Gazette des Hopitaux.

19. Therapeutics of Consumption.—Dr. Corroon, in a paper read before the Medical Society of London (Oct. 20, 1862) presented the results of some experiments which he has been carrying on for the last five years at the Hospital for Consumption, Brompton, upon the action of certain medicinal substances upon phthisis. He had exhibited the following substances, each in twenty-five cases of simple uncomplicated consumption—viz., phosphorus, liquor potassae, hydrochloric acid, iodide of iron, iodide of potassium, chloride of sodium, vinum ferri, glycerine, sesquichloride of iron, chlorate of potash, quinine, and phosphoric acid. The results were numerically stated upon a table which was exhibited. The phosphorus was administered in doses of about one-twenty-fifth of a grain two or three times a day; in a few cases it seemed to do good, but more generally its effect was unsatisfactory. Liquor potassae was productive of very little good, and presented a marked contrast to the dilute hydrochloric acid, which evidently contributed in many instances to marked improvement in the patients; only 12 per cent. of those who had taken the potash having been benefited, whilst 68 per cent. of those who had taken the hydrochloric acid received more or less good. Amongst the latter were some very decided cases. Iodide of potassium contributed but few cases of improvement, its effects being generally of a negative character. Iodide of iron, however, made a very respectable addi-
tion to the list of improved cases. In many instances chloride of sodium acted favourably as a tonic, both the appetite and general power of the patients appearing to increase under its use. Steel wine was productive of very good results, especially in children and young persons. The author appeared to place great faith in its use, particularly when given with, or immediately after, meals. Glycerine failed very generally, and its effects could bear no comparison with cod-liver oil, both these substances having carefully weighed one with the other. Of all remedies the sesquiehloride of iron seemed the most effective, a considerable number of patients (66 per cent.) having derived more or less advantage from its use. Dr. Cotton stated that both in his hospital and private practice he had long regarded this as one of the most useful agents in the treatment of the ordinary run of consumptive patients. Chlorate of potash proved useful in many of the very cachectic cases; but it was far from a "specific"—a title given to it by more than one medical practitioner. Quinine was less effective than many other tonics, although it did good in a small proportion of cases. Steel and quinine, however, were spoken of by the author in very laudatory terms. Phosphoric acid acted as a tonic in a certain number of cases, but was inferior to other mineral acids, especially the hydrochloric. The author carefully explained that the table he had exhibited showed rather the comparative than the absolute value of the remedies he had given, since it was impossible to separate from its share in the results the combined action of hope, rest, good diet, and general hygiene, which at the Consumption Hospital form an important part of the treatment.

The following are amongst the conclusions which Dr. Cotton wished to draw from the facts he had detailed:

1st. That since, during the administration of each one of the agents he had experimented upon, several cases were observed to run through the various phases of the disease, some to a fatal termination, it is obvious that, whatever the amount of benefit which in some cases followed their use, no one of such agents deserves the title of "specific." 2d. It may fairly be concluded that the good effected by any of these agents was due to their respective tonic and upholding influence upon the general system. 3d. In the majority of phthisical cases, steel—especially the sesquiehloride of iron—and the mineral acids appear to be the most effective; but tonics generally are productive of more or less improvement. 4th. Since, however, even steel and mineral acids, as well as other useful tonics, are undoubtedly inert in a certain proportion of cases, it is not improbable that there are varieties or modifications of phthisis, each of which may require a particular treatment. As there are special varieties of many other diseases requiring special modes of treatment, and yielding to none other, it is possibly the same with consumption.

Dr. Cotton observed, in conclusion, that we are too apt to consider and to treat phthisis as a separate and always similar disease, forgetting the almost endless varieties or modifications it presents; and stated his conviction that at no distant period of time consumption, like many other diseases, will be shown to present definite and special forms, each of which requires definite and special management.—Lancet, Oct. 25, 1862.

20. Pleuritic Effusions, viewed in Relation to Thoracentesis.—Dr. Henley Thorp has published (Dublin Quarterly Journ. Med. Sc., Aug. 1862) some interesting observations on this subject, illustrated by two cases in which thoracentesis was successfully performed.

The objects of Dr. T.'s observations are—1st. To sketch briefly the particular morbid states that may call for the performance of thoracentesis; and 2d. To indicate what he conceives to be the just pathological principle which should guide us in our mode of performing the operation.

"The most extraordinary fact connected with the history of paracentesis thoracis is," Dr. T. observes, "the variable amount of success that has hitherto attended it in different hands—the most discordant results have been obtained by men of equal experience, and possessing similar advantages for observation—