

not squirt *Morphia* into the poor sufferer with bellyache or neuralgia and expect him to be exempt from all future bellyache?

But we inoculate for the small-pox. Aye, my classmate, but by the inoculation with that effete and ancient echo of the cow-pox of the late Dr. Jenner and his dairy maids—may their souls rest in peace! we set up in the system a disease, a distinct disease—the kine-pox—and it is because the patient has this disease that he is rendered immune in the future. Now, does *Arsenic* set up any cholera, bastard or otherwise in the human system? As a matter of fact, the symptoms of arsenical poisoning are not very much similar to the real cramp-grip cholera; they do simulate cholera morbus, and we, poor, deluded Homœopaths, whom the regulars are following afar off (they will get there), just think *Arsenic* is a good remedy for cholera morbus. But we do not expect to see that gaunt and grim spectre, with the cold breath and sunken eyes, flee very fast before the exorcism and inoculation with *Arsenic* on ivory points.

Classmate, I am pessimist enough to predict that our enthusiastic friend from Paris—Texas—will return from the dirty, but romantic East, poorer in pocket and with the great problem yet unsolved, because he starts his little calculation in bacteriological supposition with a false quantity.

Hahnemann, without ever having seen a case of cholera, said in 1832 that *Cuprum* was the remedy. He also advised that *Cuprum*, taken internally, be used as a preventive. It is from Homœopathy that the man from Texas gets all his data; why does he not look more carefully into the effects of remedies on the healthy? *Cuprum* is better than *Arsenic* according to his own postulate. But the beauty of *Arsenic* is that if by inadvertence you give the man too big an injection of *Arsenic* you know the antidotes and the man is saved. But if it is necessary to antidote the *Arsenic*, is, after its use, the man still immune from the cholera? Or if you give more *Arsenic* does not the antidote lose its effect? Grave questions, these, for the man from Texas.

I've been trying to puzzle out the modus op—but, pardon, you do not like Latin—the *raison d'etre*—there we are again—well—the reason why; the manner in which *Arsenic* is to prevent cholera. Let us imagine a microbe war. A cholera germ, made frantic by a diet of rotten water, is introduced from some stinking well on the route of a Mohammedan pilgrimage, into the person of a True Believer. That microbe wags his venomous

tail and immediately begins to increase and multiply according to scriptural injunction. Soon the poor Believer is full of squirming cholera germs, shining examples of cramp and colic. Here comes in your benefactor. He introduces potent *Arsenic*, stored up for such emergency on the tiny ivory handles to health. Is there a germ to *Arsenic*? For argument let us suppose, as did the ancients, those mystics, the alchemists, that a soul is in the *Arsenic*, a genius, dwelling in each tiniest molecule, one molecule, one genius. Well, on one point there are many arsenical molecules, a spirit, as the alchemists dreamed, dwelling in each molecule. The *Arsenic* sprites are in the body of the True Believer. Each soul of an arsenical atom bristles with toxic rage at sight of the festive cholera germs. The soul of the atoms of *Arsenic* have vanquished the sportive cholera microbes—the True Believer is saved. And ever, until that day of bliss, when that Believer goes to join the houris of the heaven of Mohammed, the arsenical genii of the sign of the ivory point, patrol the arteries and veins of the True Believer, and if, perchance, some unhappy and wandering comma bacillus appears the genii of the ivory point swoops down upon him and again that True Believer is saved.

The Hindoo with this talisman may drink the swill of the sacred Ganges—he may quaff from the poison wells of his native village. He is safe. Saved by this fateful discovery of the man from Texas. The Italian, in the pleasing precincts of hand organ and monkey paradise, need no longer fear the results of rotten watermelons. Send for the magic point of the man from Texas. Microbiotic war ensues; the lineal descendant of Romulus or Remus, or Cataline, is saved to still sweep the city dust into the faces of the city swells. It is difficult to properly estimate the results of this marvellous discovery. Now, if some one would only translate the little German pamphlet by Lux and tell them where to find how the earlier men of our school thrashed out animal extracts years ago, the great discoverer from Germany, France, Kamschatka, or Paris, Texas, would be saved the necessity of much remarkable thought.

Go to, my friend, is it really worth thinking about all this pseudo-science of injections of serums, animal extracts, inoculations of horses? It is science on a bicycle; it is science run mad; madder than the bear of Aqua Tofana. Let us turn from these philosophers from impulse, these discoverers of mares' nests, to a

sentence that a real philosopher, one Samuel Hahnemann, wrote about *Arsenic*: "It is not the fault of Him who loves us all that we abuse powerful medicinal agents, administering them either in too large doses or in cases for which they are not suitable, being merely guided by the caprices of miserable authorities, and without having taken the trouble to investigate the inherent curative virtues of the drug and to make our selection depend upon the knowledge thus obtained."

I am your old classmate,

T. L. BRADFORD, M. D.

MISCELLANEOUS JOTTINGS.

When I first began to indulge in the practice of writing letters to the RECORDER it was not my intention to go beyond making a transcript of the various notes which I had for some years been jotting down. But somehow I got off this track, first with obstetrics then with epidemic diseases, of which latter I feel conscious that I have been too discussive and tedious.

I now revert to my first intention and begin making a transcript of my old notes, some of which I hope will be either interesting or instructive. Of course some readers will differ from me sometimes. However, I trust we shall all be liberal enough to agree to disagree.

Reason Versus Bigotry.

The discovery of the homœopathic system of medicine has been of incalculable benefit to the world. But do not let us be so deluded as to believe that no one can be cured by any other means than Homœopathy. If we believe thus, we resemble those who think that there is no true church except that to which they themselves belong. This is bigotry, and against this narrowness of mind we should be free. We should endeavor to keep an open mind and be willing to take a useful hint no matter from what source it comes.

A question that comes to my mind is, can any homœopath say that he has never been disappointed with and of the remedies which he has prescribed? Perhaps not even Hahnemann himself could say that. I know that some will say that failure is the result of not having found the simillimum. How true this may be one cannot say, but this we know, that to find

the simillimum is often a most difficult thing to do. Moreover, should we in any case refuse to give a remedy that we feel sure will relieve the patient because we have a doubt respecting its having been proved? Surely no one could be so stupid as this.

Here is an illustration: Dr. Lang, writing from York, Neb.* tells us of the wonderful effects of *Ol. Gaulth.* in neuralgia. He made some marvellous cures with it and we are much obliged to him for having given us the results of his experience. Now notice the concluding words of this extract from his communication: Often was I called to treat some obstinate cases of ciliary or facial neuralgia, and found my skill taxed to its utmost to bring out the balm. Did I find it in the indicated homœopathic remedy? *I trust so, but not in any Materia Medica.* (One likes the word *trust* here). He found it in the *Oil of Gaultherium*, and we trust that it acted homœopathically. He did not agree that it must first be *proved*, and so keep his patient waiting a week or two whilst he ascertained whether the medicine would really produce facial neuralgia in a healthy person. He acted rationally and hoped that the provings, whenever made, would support the practice. We all hope so, but whether they do or not we ought not to be debarred from employing any remedy the effect of which we know from experience will cure the patient.

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I am very much addicted to drawing analogies from theology; sometimes *true* analogies and sometimes only illustrations.

This question of *bigotry* on medicine has its counterpart in theology. There are, as we all know, a few religious bigots still, and medicine is not without them either. And to all alike we may say in the ironical language of that much tried man, Job, "No doubt ye are the people and wisdom shall die with you." Then, without irony, the patriarch adds, "But I have understanding as well as you; I am not inferior to you." Job may here be thought egotistic, but was he not fully warranted in saying this? His friends were men of intelligence, but their minds were rapid, partial, unexpanded. Job could see a little further than they could and a little further than Calvin could, too. The friends of Job had good intentions, yet that is not enough; they ought to have had more charity. We sometimes complain of "allopathic bigotry," and justly so. Are we totally

* HOMŒOPATHIC RECORDER May and July, 1894.

free from bigotry ourselves? If we are not, we cannot fairly complain of others.

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If we compare the practice of Homœopathy with that of any other system of cure, we shall find it fully capable of sustaining any such comparison with credit. But if we say that this is the *only* system whereby disease may be cured, we shall say that which is not true. We shall be guilty of that which we condemn in others, viz., bigotry.

The Universal Medical Church vs. Freedom of Opinion.

There are theologians who wish to see the establishment of a universal church; an infallible church. One can quite understand such a desire as this. Theology would thus become a more *definite* system than it is now. It would be able to say authoritatively: "This do, and thou shalt live." There would then be no jarring sects disputing over points of no importance. How beautifully harmonious it would be. I think I should like it myself.

There are many beaux ideals presenting themselves to us in this life, but, alas, they are unattainable; and this universal church ideal is one of them. There never will be a universal church, either in theology or in medicine, for minds are not fashioned after one model.

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The beau ideal exists in medicine as well as in theology. We wish to be able to practice medicine with the same certitude that we work a sum in arithmetic. It must be an infallible science. Beautiful idea! But it is impossible. Even Homœopathy will never become the universal method, although making the *nearest approach* to perfection.

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An Alarming Prospect.

We need never feel afraid to quote our adversaries, more especially when we have an answer ready for them.

I was one day tackled by a rigid teetotaler and hygienist, who said to me: "The time is coming when we shall be able to dispense with your profession."

"Indeed?" said I.

"Yes; as intelligence increases, as it will do, and as people

begin to live rationally, they'll not want any doctors. Why, it will be accounted a sin to have a headache then."

A lady, who was listening, said, "I think they will be wanted sometimes."

Fancying that this lady was referring to accouchments, I said, "Yes, I think we shall get a job now and then."

"About once a year," said another.

Then the teetotaler said, "What will you do then?"

Really I could not tell; but some vague notions of having to come to America to hoe corn, flitted through my brain—a painful alternative. Upon considering over the matter next day, I determined to talk with my friend again, and having found him I said, "Look here, Mr. B——, you are mistaken, I think, about the elimination of our profession in the future for although men may lead a regular and abstemious life, they cannot escape zymotic diseases."

"What diseases are those?"

"The infectious ones."

"Why not?" said he.

"You may, it is true, prevent some, but not others. You may prevent typhoid fever by perfect sanitation; but you cannot prevent influenza and some other fevers."

"Oh! what is the cause of influenza, then?"

"I will give you my opinion. It is caused by an alteration of the gases which compose our atmosphere."

"And you cannot alter those?"

"Is it likely now?"

"I don't know. What can't be done to-day may be done to-morrow."

"I cannot conceive of this being ever done."

"No; who would have conceived of a locomotive before George Stephenson made one? Who would have conceived of sending messages by telegraph and telephone?"

But this reasoning failed to convince me that anyone would ever be able to control the gases of our atmosphere; notwithstanding that my friend appeared to be so sanguine about it. I next tried to convince him that medical treatment had proved very efficacious in epidemic diseases when judiciously employed.

"I have no doubt," said he, "that Homœopathy can do better than the other system, but we shall have something better than Homœopathy some day."

"Perhaps so."

"Yes; what about mesmerism, hypnotism and magnetism?"

"All very good, I dare say, in their place."

"I tell you, doctor, we shall be able to do without your profession soon. The time is coming when it will be thought a sin to have a headache."

"But will there not be broken bones?" said a lady who had been listening; but my friend did not heed this question, for he had so much to say on the other side. "Every profession," he continued, "is going to be looked into, and then the parsons will have to clear out too."

Our discussion then came to an end; and it was some little comfort to think that the medical profession was not to be alone in the general discomfiture. However, I see no just cause for anxiety in our own time.

Sydenham.

Says Sir Richard Blackmore, "I one day asked Sydenham what books I should read to qualify me for practice. 'Read Don Quixote,' said he, 'it is a very good book; I read it still.'" The biographer of Sydenham remarks: "Whether this rejoinder was intended as a satire upon the medical literature of the age, or as Dr. Johnson thinks, upon the talents and attainments of Blackmore himself we cannot say."

My own opinion is that the reply was intended as a satire upon the medical *practice* of those days, a practice that well deserved the satire; yet strange to say, Sydenham himself followed the practice of Dr. Sangrado in respect to blood-letting.

This remarkable man was born in the year 1624. Speaking of small-pox, he says: "Nature, left to herself, does her work in her own time, and then expels the matter in the right way and manner."

The antitoxinists should read this.

Sententice Agrorum.

There are some patients (and these are the sort we like) who are content to be cured by any means which the doctor in his wisdom may choose. There are others who want to be cured according to their own preconceived notions. If they are homœopathic they must be cured by homœopathic medicines. If they are allopaths they must be cured in that way. If they are hydropaths they must be cured by water.

These peculiarities remind one of Naaman, the Syrian, who had a strong desire to be cured by dipping in the rivers of Damascus rather than in the Jordan. He wanted to be cured in his own way; indeed, he at first objected to *any kind* of Hydro-*pathy*. But as this wish could not be gratified, he then desired to choose his own stream.

Patients of this kind are difficult to deal with.

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Many people foolishly talk about faith as being the active agent when any person is cured whilst taking homœopathic medicines. On the contrary I should say that faith without medicine is useless for the body, as faith without works is for the spirit.

Allopathic Advantages.

In allopathic practice there are certain advantages over homœopathic practice, bearing in mind the tastes and prejudices of mankind. Their medicines have the advantage of possessing taste and color, which have always been associated with the idea of medicine. And taste and color may often be pleasant to both tongue and eye. Just to give one illustration: *Ammon. mur.* is a good medicine for bronchitis, influenza, etc. The homœopath gives it alone, and there is nothing either in taste or color to recommend it to the patient. The allopath can combine it with the fluid extract of *Licorice*, and then it possesses both a pleasant taste and an agreeable color, and it is equally if not still more efficacious. Almost every patient would prefer the latter. So the old school man has the preference.

Another advantage is that his medicine is always put in a bottle ready for use. Some people have no faith in medicine left in tumblers; they like to have it corked up in a bottle all ready for use. I believe it would often be better to humor this wish. We might use a two ounce vial, giving the medicine in teaspoonful doses, with or without water.

G. HERING.

London, 157 Seven Sisters' Road.

AN "ORIGINAL" PROVING OF *PLANTAGO*.

Reading an account of how a convict in some equatorial colonies discovered an antidote to the bites of venomous snakes by watching a fight between a snake and an iguana, in which the iguana

immediately after being bitten would go to a certain plant and chew a piece off and then return to the fight, reminds me of a similar incident, related in the *Nature*, which I read some ten years ago: A gentleman watching a fight between a large spider and a toad, observed that every time after being bitten the toad would go to the common plantain, chew a piece off and return to the fight as lively as ever; the observer, to try the efficacy of the herb, plucked it out, when upon the toad not finding its accustomed antidote soon succumbed to the effects of the spider's poison.

In popular practice the plantain has been used successfully in bad sores, ugly wounds that refused to heal. I think it would be useful in septicæmia, along with *Iodine* and *Lachesis*.

Verily the saying of Paracelsus is true: "Physicians must not learn from the paper books, but from the book of nature, whose leaves are open before our eyes."

A. A. RAMSEYER.

Salt Lake City, Utah.

HOMŒOPATHIC MEDICAL SOCIETY OF CHICAGO.

The first meeting of this society for the season of 1896-'97 will be held at 8 o'clock, P.M., Thursday, September 17th, at the Auditorium Hotel, Chicago. During the early part of the winter papers will be read according to the following

Programme :

SEPTEMBER 17. FIRST MEETING.

Essayist : Sheldon Leavitt, M. D.

Subject : "The Obstetrical Forceps."

Dr. Leavitt will take up the subject from the clinical side. *First*, some attention will be given the instrument itself—its design, its best form, etc. *Second*, the different modes of application, including the different positions and presentations. *Third*, conditions calling for the forceps. *Fourth*, dangers etc. *Demonstrations* with instruments will be made on the pelvis or manikin. Prints and drawings will be used for purposes of illustration.

Essayist : Charles Adams, M. D.

Subject : "Reckless Surgery."

Dr. Adams' paper is a protest against the too free use of the

knife—the *furor operandi*—to which many members of the profession are prone now-a-days.

Clinic : Dr. A. E. Thomas will present two cases of rare and anomalous forms of heart disease.

OCTOBER 15. SECOND MEETING.

Essayist : John W. Streeter, M. D.

Subject : "Treatment of Retroversion of the Uterus."

Essayist : B. S. Arnulphy, M. D.

Subject : "The Angina that Kills."

NOVEMBER 10. THIRD MEETING.

Essayist : G. F. Shears, M. D.

Subject : "Surgical Treatment of Inflammation of the Bladder."

Essayist : Clifford Mitchell, M. D.

Subject : "Hæmaturia."

DECEMBER 10. FOURTH MEETING.

Essayist : J. H. Buffum, M. D.

Essayist : C. Gurnee Fellows, M. D.

Subjects : To be announced.

JANUARY 15. FIFTH MEETING.

Essayist : E. S. Bailey, M. D.

Subject : "The Renal Insufficiencies in their Relation to Medical Diseases of Women."

Essayist : Wm. G. Willard, M. D.

Subject : "Peritoneal Tuberculosis."

At the February meeting Dr. Julia Holmes Smith will read a paper on "A Consideration of Some Pathological Conditions at the Time of Puberty." The other essayist for the evening has not yet been assigned.

Papers will also be presented by Dr. R. Ludlum, Dr. H. R. Chislett, Dr. W. W. Stafford, Dr. H. V. Halbert, Dr. J. S. Mitchell, Dr. Howard Crutcher, and possibly one by Dr. Ch. Gatchell, on "Incipient Phthisis, Pulmonalis; Diagnosis and Treatment."

Announcement cards will be sent to all Chicago physicians two days before each meeting.

CH. GATCHELL, M. D., *Prest.*

JOS. P. COBB, M. D., *Sec'y pro. tem.*

THLASPI BURSA PASTORIS.

The proving of *Thlaspi bursa pastoris* conducted by Dr. J. C. Fahnestock, of Piqua, Ohio, and read before the Homœopathic Medical Society of Ohio, at a recent meeting, confirms what Rademacher said of this useful remedy years ago and Dudgeon's experience with it at a more recent date. Rademacher said of *Thlaspi*:

"But the most important remedial power of this common innocuous plant I learned from no medical author; the knowledge of it was actually forced upon me by the following case: I was called to see a poor woman from whom, eight or ten years before, I had brought away a large quantity of urinary sand by means of *Magnesia* and *Cochineal*, and thereby cured her. Now, the tiresome sand had again accumulated in the kidneys, and the patient was in a pitiable state. The abdominal cavity was full of water, the lower extremities swollen by œdema, and the urine of a bright red color, which formed, on standing, a sediment unmistakably of blood. I prescribed tincture of *Bursa pastoris*, 30 drops 5 times a day, solely with the intention of stooping the hæmaturia as a preliminary; but imagine my astonishment when I found that the tincture caused a more copious discharge of renal sand than I had ever witnessed. * * * Since then I have used this remedy in so many cases with success that I can conscientiously recommend it to my colleagues as a most reliable remedy. Among these cases was one that appeared to me very striking. It was that of a woman aged thirty, who came to me for a complication of diseases. I examined the urine for sand but found none. I gave her the tincture of *Thlaspi bursa pastoris*, and a quantity of sand came away. On continuing the tincture much more sand came away and her morbid symptoms disappeared."

Dr. Dudgeon finds in *Thlaspi* a remedy for sand or brick dust sediment and also for uric acid in the urine. He writes:

"I have elsewhere mentioned the power of this substance to affect the secretion of uric acid, and since then I have seen several cases corroborative of its medicinal virtues in this direction. One, a gentleman, æt. 57, who, in addition to other dyspeptic symptoms, had occasionally large discharges of coarse uric acid, coming away in masses the size of a good big pin's head, but curiously enough without pain. I prescribed *Thlaspi*,

which he said soon stopped the uric acid. Nearly a year after this he called on me for a different affection, and informed me that the uric acid had reappeared several times in his urine, but that a few doses of *Thlaspi* soon stopped it, and it never came to the height it attained when I first gave it to him. A lady, nearly eighty years of age, was suffering from the pressure of a calculus in the left ureter, which I knew to be of uric acid, as she had previously passed much 'sand.' The urine showed no sand, and was very scanty. I tried several remedies, among the rest the *Borocitrate of Magnesia*, but it was not till I gave *Thlaspi* that a great discharge of coarse brick-colored sand took place, with speedy relief to her pain. At the same time, indeed, I made her drink copiously of distilled water, which has a powerfully disintegrating effect on the uric acid sometimes, but, as she had already been taking this for several days without effect, I am inclined to give the whole credit of the cure to *Thlaspi*."

"It is not alone in such cases that *Thlaspi* is useful. Its ancient uses as a hæmostatic has been confirmed in modern times and in my own experience, and my friend, Dr. Harper, related to me lately a most interesting cure he had effected by its means of a very prolonged and serious affection. The case was that of an elderly lady who for years had suffered from a large discharge of muco-pus, sometimes mixed with blood, sometimes apparently nearly all blood, which poured from the bowels after each evacuation. She had been many months under the medical treatment of the late Dr. D. Wilson, who at last told her he considered her disease incurable. She then put herself under the treatment of a practitioner who relies chiefly on oxygen gas for his cures; but she was no better—rather worse—after his treatment. She then came to Dr. Harper, who worked away at her with all the ordinary remedies without doing her a bit of good. At last he bethought him of *Thlaspi*, led thereto by my remarks on its anti-hæmorrhagic properties in my 'therapeutic notes' in the *Monthly Homœopathic Review* of October, 1888, and he found that from the time she commenced using this remedy the discharge from the bowels gradually declined and ultimately ceased, and there has been no return of it."

In Dr. Fahnestock's proving, as reported in the *Medical Counselor* for August, 1896, Prover No. 1, only experienced an increase of urine from a normal of 25 ounces to from 35 to 38 ounces under the influence of 15 drop doses of the tincture of *Thlaspi* every two hours.

Prover No. 2. Under the influence of 10 drop doses of the drug, experienced an increase of 10 ounces of urine in twenty-four hours. As the effect of the drug passed off, the "urine diminished with red sediments," and this was the last of the observed symptoms persisting for a while after the other had passed off.

Prover No. 3. Under the influence of 5 drops of the 1x dilution every hour, experienced the increase of urine. This proving was begun on the 30th of January. On February 5th the remedy was discontinued on account of its unpleasant effects, and with the subsidence of the amount of urine passed came "red, sandy deposits." A month later this same prover took increased doses of the remedy, and among other symptoms, or effects, was a large increase of urine, with brick dust sediment.

Among other more marked symptoms experienced by these provers, was puffy or swollen eyes.

The effect of *Thlaspi* seems to be that of flushing out the kidneys and bladder, taking along with it the uric acid, brick dust and sand that may be in them. Whether it will cure the conditions causing those formations is another matter. But after they are formed and are giving the patient trouble, there seems to be nothing better known in medicine to free the system from them than appreciable doses of the tincture of *Thlaspi bursa pastoris*.

USES OF PEROXIDE OF HYDROGEN.

Peroxide of Hydrogen is not toxic; in fact, it is used for internal medication, and the amount which may be taken without injurious effect is well illustrated by a case recently reported, in a course of discussion on diphtheria, by Dr. Rudolph Matas. In this case, in which Dr. Matas had occasion to prescribe it for a man suffering from asthma, the patient, from a misunderstanding of the directions, took six or eight four-ounce bottles of *Peroxide of Hydrogen* during one night, and was not only not injured by this excessive amount, but actually believed that he had been benefited.

In diseases of the nose, *Peroxide of Hydrogen* is an important therapeutic agent. In ozæna a wash of a twenty-five per cent. solution is useful; or, after washing the nostrils with an alkaline or the normal physiological salt solution, the *Hydrogen per-*

oxide, pure or mixed with an equal quantity of *Glycerine*, may be applied locally by means of an atomizer or applicator with cotton to remove or destroy any scabs or secretion which may be left. In this way the nostrils can be kept clean, and the offensive odor, which is one of the most unpleasant features of this disease, may be prevented. In purulent rhinitis a five per cent. solution, to which an alkali has been added, is useful. It is also said to be serviceable in controlling nasal and pharyngeal hæmorrhage.

In membranous rhinitis, whether due to the Klebs-Loeffler bacillus or to micrococci, the spraying of the nostrils with a twenty to fifty per cent. solution is indicated, and has given me excellent results. My experience in diphtheritic rhinitis with this agent has been so satisfactory that I have not deemed it necessary to use the antitoxin in these cases, as this does not seem to prevent the post-diphtheritic paralysis, which would be the only reason for my using it in diphtheritic rhinitis.

In specific necrosis in the nostrils, *Peroxide of Hydrogen* is an important agent, not only for its disinfecting properties, but also for controlling the horrible odor that is present in these cases. In diseases of the accessory sinuses of the nose, *Peroxide of Hydrogen* is so beneficial that I use it in all cases, whether of a maxillary, frontal, ethmoidal, or sphenoidal sinus. In my opinion it cleans and disinfects the infractuositities of these cavities more effectively than any agent that we have.

In diseases of the throat, *Peroxide of Hydrogen* is used in follicular and other forms of tonsillitis, and in specific affections, and is a sheet anchor in diphtheritic processes in this region. Long before the introduction of antitoxin, I have had excellent results from *Hydrogen peroxide* in diphtheria, and even since the use of this serum I never fail to use the *Peroxide* as a valuable adjunct, and I believe it to have had an important bearing on the results obtained. It attacks the membrane, disinfects the parts, and has no injurious effects when swallowed, which is more than can be said of many other antiseptics used for this purpose.—*W. Scheppegrell, New Orleans, La., in Medical Record.*

ANOTHER BACILLINUM CASE.

Widowed unipera, aged thirty-two years. Several members of the patient's immediate family had within a few years died of tuberculosis, and her husband, whom she had nursed almost