vomiting and diarrhœa, or cases of stricture of the œsophagus and stomach, &c., often terminate by starvation. The patient gets weaker. There is languor, a feeble circulation, and coldness of the extremities. The hands, feet, nose, and ears get dusky. The breathing gets more and more shallow. The pulse at last becomes almost imperceptible, and any attempt to sit up or move produces faintness. Such symptoms are common to all chronic diseases in which there is slow wasting away.

In fevers generally, the *typhoid state* is the commonest mode of termination.

In diseases of the *nervous system*, the chronic spinal affections either terminate ultimately in extension to the vital parts, or by some intercurrent affection. In brain disease, the termination of acute cases is generally by coma, and often by convulsions. The patient becomes gradually unconscious, in many cases; the breathing becomes irregular and stertorous; secretions accumulate in the bronchial tubes; and death appears to end by asphyxia.

In simple *senile decay*—beyond the obvious appearances of gradual failure—it is often impossible to detect any physical sign which would indicate that death was near at hand. There is often mild delirium; and in many cases there is wild and noisy excitement for a few days before the unconsciousness which supervenes and ushers in the fatal termination. Many cases, certainly, run a course similar to the chronic wasting diseases already described; but others, again, when much debilitated, seem to die of sudden failure of the nervous apparatus of the heart. The previous visit may not have enabled the physician to detect any change in the circulatory organs.

CHAPTER XVI.

POST-MORTEM EXAMINATION.

(Summarised, by permission, from Woodhead's *Practical Pathology*.)

In some cases it is advisable to get a history of the case, and especially when the death has been a suspicious one, or due to some accident, &c. Note the time the patient died, and the interval between the death and examination. Note the colour of the various parts of the body; the *post-mortem* lividity; the appearances of wounds, abrasions, &c.; and the degree of *post-mortem* rigidity. In systematic examinations, the *post-mortem* case-book—containing important headings, as name, age, height, &c.—should be followed.

Head.—After the external examination, an incision is made behind the ear and carried over the vertex of the skull to the same point on the other side. The scalp is then dissected and reflected forwards and backwards until the eminences over the frontal sinuses and the occipital protuberances are exposed. After examination of the soft parts, carry the knife round the skull at the level above indicated. The saw is then used carefully, and the skull-cap loosened by the aid of the chisel, mallet, and lever. The skull-cap can generally be removed by dragging on the fore part; but sometimes the adhesions render a good deal of force necessary. A small opening is made in the dura-mater on each side, just above the bony margin, and a blunt-pointed bistoury is introduced, and the incision carried round to the mesial line on each side, backwards and forwards; then cut through the attachment of the membranes to the *crista galli*, and draw them back. After examination of the inner surface of the membranes, remove the brain. Introduce the fingers of the left hand beneath the frontal lobes, and gently tilt the brain backwards, severing in the following order, the olfactory bulbs; optic nerves; internal carotid vessels; third, fourth, and sixth pairs of nerves—the latter being divided along with the tentorium. The fifth and seventh pairs are then divided, and the incision carried along the margin of the tentorium, dividing that membrane from the petrous portion of the temporal bone. Cut through the eighth and ninth nerves, and then cut through the cord as low down as possible, and tilt the brain out carefully. Examine the inner surface of the dura-mater at the base of the skull. The dura-mater may afterwards be detached and the bones examined—especially the petrous portion of the temporal bone.

The Brain.—"With a long thin narrow-bladed knife cut horizontally from within outwards into the hemisphere, just above the level of the corpus callosum, leaving the upper part of the brain attached to the lower by the pia mater only, at its outer margin; make a similar incision into the opposite hemisphere." Examine the lateral ventricles and their contained fluid, by cutting vertically down into the corpus callosum, at a distance of one-sixteenth of an inch from the mesial plane. The depth is only about one-eighth of an inch. Extend the incision backwards and forwards, to expose the ventricle, and note the quantity of fluid which escapes. Then divide and subdivide the upper portions of the cerebral hemispheres already turned outwards—cutting from within outwards, and never completely separating the lamellæ. To open into the anterior horn of the ventricle, cut horizontally into the frontal lobe a little below the level of the body of the cavity, removing the brain substance above the incision. The posterior horn is opened in a similar way. Separate the pons, medulla, and cerebellum from the large brain, "by cutting towards the mesial line in a plane, the anterior border of which is just in front of the pons, the other border lying immediately behind the posterior pair of the corpora quadrigemina; a similar incision is made from the opposite side." "Having determined the contents of the lateral ventricles, the state of their walls and venous plexus, and the condition of the septum, the latter is taken hold of with the left hand, close behind the foramen of Monro, the knife is

pushed in front of the fingers through this aperture, and the corpus callosum cut through obliquely upwards and forwards, and then all these parts (corpus callosum, septum lucidum, and fornix) are carefully detached from the velum interpositum and its choroid plexus. After these two latter have been exposed, we have to examine the state of their vessels and tissue. Then the handle of the scalpel is passed from the front under the velum, which is thus detached from the pineal body and corpora quadrigemina, the state of these parts is determined, and the third ventricle now exposed" (Virchow). A vertical incision through the corpora quadrigemina opens into the aqueduct of Sylvius. The corpora striata and optic thalami are examined by numerous incisions. Next cut through the peduncles of the cerebellum and make free incisions into this organ, and treat the pons, medulla, and upper part of the cord in a similar manner.

The removal of the spinal cord is generally deferred to a later stage of the post-mortem examination, but may be conveniently here described. Divide the skin over the spinous processes and remove the muscles to the side. A chisel or saw and bone-pliers may be used to divide the vertebral arches, and remove them with the spinous processes. When the dura-mater has been exposed and examined, slit it open longitudinally, and test the consistence of the cord by gently passing the finger over it. Divide the roots of the nerves, and dissect the cord out carefully from below upwards. Numerous transverse incisions are made in the cord, unless it be desired to preserve it for future microscopical examination, when it is better to cut the cord into four equal parts, and suspend them in a bottle containing a 4 per cent. solution of bichromate of ammonium (Bramwell). The preservative fluid should be changed on the second, and again on the sixth day; and the preparation kept in a cool place.

The Thorax and Abdomen.—An incision is made from the sternal notch—or from the symphisis of the chin, if the larynx is to be examined—to the symphisis pubis. At the ensiform cartilage dissect carefully down to the peritoneum, and then introducing the fingers, raise the abdominal tissues from the subjacent organs, and open into the abdominal cavity. The tissues are dissected back over the chest and the cartilages cut through, beginning with the second, and always holding the knife so that in cutting through it falls upon the next cartilage without injuring the organs beneath. When the lower cartilages are cut, pass the knife horizontally under the breast-plate, and cut round by the edge to the ensiform cartilage and to the other side, then raise the breast-plate and either crack through the upper part of the sternum or divide the first rib and disarticulate the clavicles. The breast-plate being removed, examine the pericardium, pleura, and abdominal organs. Note their relations, and observe if there be adhesions, fluid, inflammation, or perforations, &c. Next open into the pleural and pericardial sacs, and note the presence and amount of fluid, &c. (if any). The *heart* is now rotated so that the right border may come to the front, and an incision is made into the right ventricle, commencing at the base, and another

into the right auricle. Remove and estimate the amount of blood from the right auricle and ventricle, and examine with the fingers the state of the tricuspid valve. The left auricle and ventricle are similarly examined. Then remove the heart by dividing the aorta and pulmonary vessels. After clearing out the clots, test the competency of the aortic and pulmonary valves by means of a stream of water. To complete the examination slit up the heart with a pair of scissors, *first* the right ventricle into the pulmonary artery; and, *second*, the left ventricle into the aorta. The right auricle is slit open from the inferior to the superior vena cava, and the left auricle opened by an incision between the openings of the pulmonary veins. The coronary vessels should be slit open and examined.

The *lungs*—after careful examination *in situ*, the hand being passed into the pleural cavity and the lung cleared from adhesions (if present)—are removed, by cutting from above downwards through the vessels and bronchi, and pulmonary ligaments. On removal, make a long free incision from apex to base, commencing at the outer edge and cutting to the root of the lung—leaving the two halves attached. Examine the cut surfaces, and try the specific gravity of consolidated pieces. Slit open some branches of the bronchus and pulmonary artery.

When necessary, the larynx, œsophagus, pharynx, tongue, and soft palate may be removed *en masse*.

The *abdominal organs* may now be examined. The omentum is first removed, and then the spleen. Make a free incision through the latter, in its thickest and longest part, and apply the iodine test. Remove the left, and then the right, kidney and supra-renal capsules. To do this, make "a vertical incision through the peritoneum external to and behind the ascending or descending colon; the intestine is to be pushed aside, and the kidney detached from its connections, by a single cut near the hilus." An incision is made through the kidney from the outer edge to the pelvis. The relative thickness of the medulla and cortex is normally about 3 : 1. Strip off the capsule, and note if adherent. Apply the iodine test after examining the cut surfaces minutely. Examine the supra-renal capsules and semilunar ganglia. The *bladder* should be opened *in situ*, and carefully explored—along with the urethra, prostate, &c., in special cases. In the female the uterus and appendages should be removed and examined. The rectum may be cut, ligatured, and removed, if required. The *duodenum* and *stomach* should now be examined for adhesions, perforations, &c., and then opened *in situ*, by an incision running along the anterior surface of the duodenum and greater curvature of the stomach. In cases of poisoning, the stomach is removed as early as possible, after applying *double* ligatures around the œsophagus and lower part of the duodenum. Empty the contents of the stomach into a clean bottle. Examine the stomach and duodenum. Examine the vena cava and bile ducts. Remove now the *liver*. Cut through the arch of the diaphragm along the left border of the liver; pull the organ forward and cut through the falciform ligament and the remaining attach-

ments to the diaphragm, posteriorly. Slit open the gall-bladder and examine. Make numerous sections through the liver and note the consistence, &c., and apply the iodine test. Examine the *pancreas*. The mesentery and intestines are examined first *in situ;* then cut through the mesentery at its attachment to the bowel—the two extremities of the intestine having previously been tied. The intestine being removed, a stream of water is passed through it, and then it is slit up with a pair of scissors from beginning to end, and the mucous surfaces examined; apply the iodine solution. Lastly, examine the *retro-peritoneal glands*, *thoracic duct*, *aorta*, *vena cava*, &c.

Average Weights of Organs.

Table used in the Post-mortem Room of the Royal Infirmary, Edinburgh.

	Male.		Female.	
	lbs.	oz.	lbs.	oz.
Human Brain, . . .	3	1½	2	1½
,, Heart, . . .	...	11	...	9
,, Lungs, . . .	2	13	2	...
,, Liver, . . .	3	5	2	12
,, Pancreas, . .	...	3	...	2¾
,, Spleen, . . .	...	6	...	5½
	Right.	Left.	Right.	Left.
	oz.	oz.	oz.	oz.
,, Kidneys, . .	5¼	5½	4¾	5

CHAPTER XVII.

PRESCRIBING.

THIS art is generally taught in the practical classes of *Materia Medica*, and it is fully discussed in smaller works to which the reader is referred. Paris' *Pharmacologia*, and *Pareira* will probably be read by all students. It is not the intention of the author of this work to enter fully into the subject; but the question of incompatibility, which faces the student whenever he attempts—as he ought—to compose a *magistral formula*, is so complex and bewildering, that a few rules have been made with a view to lighten the difficulty.

It is a great mistake for the student ever to attempt to commit to memory the long list of incompatibles generally given in the text books. Were he to attempt the list given in Paris' *Pharmacologia*, he would have a task, indeed! A few of these must be known, but "how *not* to do it" simply increases the embarrassment of the young prescriber. He may know that a soluble salt of lead to which sulphuric acid is added, will produce an insoluble sulphate of lead, and the knowledge acquired in this way will be useful; but to tell him a few hundred decompositions of this sort will not, at the outset, tend to give him confidence. Mistakes happen most frequently with the *compound* substances, owing to the student forgetting the minor constituents—*e.g.*, carbonate of ammonia should not be prescribed with the syrup of squills, as there is an acid used in its preparation, and which is present in small quantity in the syrup. The result would be effervescence. The student is advised to use at first only the formulæ given by his professors and teachers, and to allow the information necessary for good prescribing, to come in the course of his studies in practice. The following rules have been formulated, with the hope that the wide field which they cover, will be of some assistance to anxious beginners. They only apply to salts, &c., used in medicine, and to solutions such as are commonly in use. Prescribe as simply as possible. *Avoid* polypharmacy.

I.—Soluble salts with the same acid or basic radicals, may be prescribed in the same mixture—*e.g.*—

Magnesii Sulphas, with Ferri Sulphas;
Ferri Sulphas, with Ferri Acetas, &c.

II.—Dilute Acids may be added to mixtures containing a salt, if the same acid be present in the salt; and the solubility is increased thereby—*e.g.*—

Plumbi Acetas, with Acidum Aceticum Dilutum.
Magnesii Sulphas, with Acidum Sulphuricum Dilutum.

III.—Salts of *potassium*, *sodium*, *and ammonium*, may be prescribed together; or with any soluble *nitrate*, *chlorate*, *or acetate;* or with any soluble *bromide*, *chloride*, *or iodide*, used in medicine (see ℞ 60).

(*Note.*—The sulphate and acid tartrate of potassium are not very soluble.)

IV.—All soluble sulphates, hyposulphites, nitrates, chlorates, and acetates, and bromides, chlorides, and iodides, used medicinally, may be prescribed in the same mixture, provided the constituent parts do not produce the following insoluble salts, *viz.*—Sulphates of mercu*rosum*, lead, or antimony; and the chlorides, bromides, and iodides of mercu*rosum*, lead, silver, bismuth, or antimony.

(*Note.*—All sulphides, phosphates, arseniates, arsenites, borates, oxalates, carbonates, sulphites, tartrates and citrates are *insoluble*, except the alkaline salts (K, Na, Am.), and the tartrates of alumina, ferricum, and copper; and the citrates of alumina, magnesia, iron, and copper.)

V.—Soluble salts, with *different* acid and basic radicals—not belonging to the previous groups—can only be prescribed together, when actually *known* that they do not decompose.

VI.—Mixtures containing *strong* tinctures when prescribed with water, require the addition of mucilage, to suspend the resinous matter. *Weak* tinctures, although they render the mixture cloudy, need not be so suspended.

VII.—Alkalies may be prescribed with solutions containing resinous matter, and they render them more soluble; but acids precipitate resins.

VIII.—Essential and aromatic oils should have some spirit or syrup in the mixture; or mucilage must be used. Fixed oils and copaiba also require mucilage.

IX.—*Iron* may be prescribed with infusions of quassia, calumba, or chiretta, as these do not contain tannin.

X.—The perchloride of mercury may be prescribed with iodide of potassium, and also with ammonium chloride—the latter increasing the solubility of the mercuric salt.

For a short list of common incompatibles, see Griffith's *Lessons on Prescriptions and Prescribing*, or Elborne's *Pharmacy and Materia Medica*.

PRESCRIPTIONS.

1. ℞.—Liquoris Arsenici Hydrochlorici, ... ℥i.
   Tincturæ Ferri Perchloridi, ... ℥iv.
   Infusum Calumbæ (*vel* Quassiæ) ad . . ℥vj.
   Misce.
   Signetur.—A dessertspoonful in water, *thrice* daily, after meals. Cardiac tonic. Anæmia.

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2. ℞.—Quininæ Sulphatis, ... gr. xlviij.
   Acidi Sulphurici Diluti, ... ℥ij.
   Aquam ad . . . . . ℥vj.
   Solve.
   Signetur.—A dessertspoonful in water, *thrice* daily, before meals; as a tonic.

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3. ℞.—Quininæ Sulphatis, ... gr. ij.
   Ferri Redacti, ... gr. i.
   Pulveris Digitalis, ... gr. i.
   Extracti Gentianæ, ... q. s.
   Misce.
   Fiat pilula, mitte tales, ... xxx.
   Signetur.—One pill, *thrice* daily, after meals. Cardiac tonic.

4. ℞.—Ammonii Carbonatis, ... gr. xlviij.
   Tincturæ Scillæ, ... ℥i.
   Tincturæ Digitalis, ... ℥iss.
   Syrupi Tolu, ... ℥ij.
   Infusum Senegæ ad . . . . . ℥vj.
   Misce et Solve.
   Signetur.—A tablespoonful in water every four hours (during the day). For heart disease, with pulmonary congestion, œdema, or bronchitis, &c.

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5. ℞.—Pilulæ Hydrargyri, ... gr. i.
   Pulveris Digitalis, ... gr. i.
   Pulveris Scillæ, ... gr. i.
   Extracti Gentianæ, ... q. s.
   Misce.
   Fiat pilula, mitte tales, ... xxx.
   Signetur.—One pill, *thrice* daily, after meals. Used in cardiac disease, emphysema, &c.

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6. ℞.—Liquoris Morphinæ Hydrochloratis, . . . ℥ss.
   Spiriti Etheris Sulphurici, ... ℥iss.
   Misce.
   Signetur.—A teaspoonful in water, when required. For cardiac dyspnœa.

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7. ℞.—Potassii Iodidi, ... gr. xxxvj.
   Potassii Acetatis, ... gr. cxx.
   Spiriti Juniperi, ... ℥iv.
   Decoctum Scoparii ad . . . . . ℥vj.
   Misce et Solve.
   Signetur.—A tablespoonful in water, thrice daily. Used in pericarditis; and in the later stages of catarrhal affections. Diuretic.

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8. ℞.—Tincturæ Ferri Perchloridi, ... ℥ij.
   Infusum Calumbæ (*vel* Quassiæ) ad . . . ℥vi.
   Misce.
   Signetur.—A tablespoonful in water, thrice daily, after meals. Used in pericarditis. Tonic, &c.

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9. ℞.—Plumbi Acetatis, ... gr. xxiv.
   Acidi Acetici Diluti, ... q. s.
   Aquam ad . . . . . ℥vj.
   Solve.
   Signetur.—A tablespoonful in water every four or six hours. For hæmoptysis (Aneurism, Phthisis, &c.).

10. ℞.—Morphinæ Hydrochloratis, ... gr. i.
Acidi Hydrochlorici Diluti, ... ♏. 5.
Acidi Hydrocyanici Diluti, ... ℥ss.
Syrupi Scillæ.
Aquæ, āā, ... ℥i.

Misce et Solve.

Signetur.—A teaspoonful in water for cough, as ordered.

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11. ℞.—Sodii Salicylatis, ... gr. lxxx.
Liquoris Ammonii Acetatis (Diluti), . . . ℥ij.

Solve.

Signetur.—A tablespoonful in half a tumbler of water, every four hours. For a rheumatic cold.

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12. ℞.—Vini Ipecacuanhæ, ... ℥iij.
Syrupi Scillæ, ... ℥i.
Liquoris Morphinæ Hydrochloratis, . . . ℥iij.
Essentiæ Menthæ Piperitæ, ... ♏. 12.
Aquam ad . . . . . ℥iij.

Misce.

Signetur.—A teaspoonful in water for a cough; not oftener than thrice daily.

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13. ℞.—Glycerini Acidi Tannici, ... ℥i.

Signetur.—For painting the larynx.

℞.—Zinci Chloridi, ... gr. xxx.
Aquæ, ... ℥i.

Solve.

Signetur.—For painting the larynx.

℞.—Argenti Nitratis, ... gr. x—l.
Aquæ Destillatæ, ... ℥i.

Solve.

Signetur.—For painting the larynx.

℞.—Iodi, ... gr. vj.
Potassii Iodidi, ... gr. xij.
Olei Menthæ Piperitæ, ... ♏. 5.
Glycerini ad . . . . . ℥i.

Misce.

Signetur.—"Iodised Glycerine." For painting the larynx (M'Bride).

14 ℞.—Vini Ipecacuanhæ, ... ℥i.
Tincturæ Camphoræ Compositæ, ... ℥i.
Liquoris Ammonii Acetatis (Diluti), . . . ℥iv.
Syrupi Tolu, ... ℥i.
Aquam ad . . . . . ℥iij.

Misce.

Signetur.—One, or two, teaspoonfuls in water—as directed. For a child of two years, with whooping-cough, a "cold," or measles.

Or

15. ℞.—Ammonii Carbonatis, ... gr. xij.
Tincturæ Scillæ, ... ℥ss.
Tincturæ Camphoræ Compositæ, ... ℥i.
Syrupi Tolu, ... ℥i.
Aquam ad . . . . . ℥iij.

Misce et Solve.

Signetur.—(Same as ℞ 14). Used when "stimulating" treatment is required.

Or

16. ℞.—Acidi Hydrocyanici Diluti, ... ♏. 16.
Syrupi Aurantii, ... ℥ss.
Aquam ad . . . . . ℥ij.

Misce.

Signetur.—Shake the bottle well, and give a teaspoonful in water, every four hours, if necessary. For whooping-cough.

Or

17. ℞.—Chloral Hydratis, ... gr. xvj.
Tincturæ Belladonnæ, ... ♏. 32.
Extracti Glycyrrhizæ Liquidi, ... ℥ss.
Aquam ad . . . . . ℥ij.

Misce et Solve.

Signetur.—A teaspoonful in water for the spasm of whooping-cough, every four or six hours, if necessary, and as directed.

18. ℞.—Ammonii Carbonatis, ... gr. lx.
Vini Ipecacuanhæ, ... ʒij.
Liquoris Ammonii Acetatis (Diluti), ... ʒiss.
Syrupi Tolu, ... ʒiss.
Aquam ad . . . . . ʒvj.
Misce et Solve.
Signetur.—A tablespoonful in water, every fourth hour. For bronchitis, &c.

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19. ℞.—Ammonii Carbonatis, ... gr. xxxvj.
Tincturæ Scillæ, ... ʒij.
Syrupi Tolu, ... ʒij.
Infusum Senegæ ad . . . . . ʒvi.
Misce et Solve.
Signetur.—A tablespoonful in water, twice or thrice daily. Used in bronchitis, &c.

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20. ℞.—Ammonii Carbonatis, ... gr. lx.
Liquoris Ammonii Acetatis (Diluti), ... ʒvj.
Solve.
Signetur.—A tablespoonful in water, every four hours. For pneumonia.

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21. ℞.—Acidi Nitrohydrochlorici Diluti, ... ʒij.
Infusum Quassiæ ad . . . . . ʒviij.
Misce.
Signetur.—A dessertspoonful (increased to a tablespoonful) in water, thrice daily, before meals. For loss of appetite during convalescence. Hepatic tonic.

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22. ℞.—Syrupi Ferri Hypophosphitis, ... ʒvj.
(Churchill; Gibson; or Fellows').
Signetur.—A teaspoonful in water, thrice daily, after meals. Iron tonic during convalescent states, &c.

Or

23. ℞.—Liquoris Arsenici Hydrochlorici, ... ʒi.
Syrupi Ferri Phosphatis Compositi (Chemical food) ad ʒvj.
Misce.
Signetur.—(Same as ℞ 22). Shake the bottle.

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24. ℞.—(Begbie's Mixture).
Acidi Hydrocyanici Diluti, ... m. 36.
Acidi Nitrici Diluti, ... ʒij.
Glycerini, ... ʒss.
Infusum Quassiæ ad . . . . . ʒvj.
Misce.
Signetur.—A tablespoonful in water, thrice daily, before meals. For phthisical cough. *Stomachic sedative.*

25. ℞.—(Niemeyer's pill).
Quininæ Sulphatis, ... gr. i.
Extracti Opii, ... gr. $\frac{1}{6}$.
Pulveris Digitalis, ... gr. $\frac{1}{4}$.
Extracti Gentianæ, ... q. s.
Misce.
Fiat pilula, mitte tales, ... xxiv.
Signetur.—One pill, thrice daily, after meals. Used in phthisis.

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26. ℞.—Liquoris Morphinæ Hydrochloratis, . . . ʒss.
Acidi Sulphurici Diluti, ... ʒiss.
Misce.
Signetur.—A small teaspoonful in water, as directed—every fourth or sixth hour if necessary. Very useful for hæmoptysis.

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27. ℞.—Atropinæ Sulphatis, ... gr. i.
Aquæ Destillatæ, ... ʒij.
Solve.
Signetur.—Poison. For hypodermic injection in the sweating of phthisis. One to four minims at bedtime.

Or

℞.—Morphinæ Hydrochloratis, ... gr. $\frac{1}{4}$.
Atropinæ Sulphatis, ... gr. $\frac{1}{60}$.
Pulveris Capsici, ... gr. i.
Pilulæ Aloes et Myrrhæ (*vel* Extracti Gentianæ), . gr. iij.
Misce.
Fiat pilula, mitte tales, ... xij.
Signetur.—One pill at night (Fothergill).

28.—"Copper pill," see ℞ 52.

28*a*. ℞.—Ammonii Carbonatis, ... gr. xxxvj.
Ferri et Ammonii Citratis, ... gr. cxx.
Syrupi Tolu, ... ʒi.
Aquam ad . . . . . ʒvj.
Misce et Solve.
Signetur.—A tablespoonful in water, thrice daily, after food. Tonic after pneumonia.

29. ℞.—Potassii Iodidi, ... gr. cxx.
Infusi Chiratæ, ... ℥vj.

Solve.

Signetur.—A tablespoonful in water thrice daily. Used in pleurisy.

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30. ℞.—Potassii Iodidi, ... gr. cxx.
Syrupi Ferri Iodidi, ... ℥iij.
Aquam ad . . . . . ℥vj.

Misce et Solve.

Signetur.—A teaspoonful in water thrice daily. A useful tonic, and deobstruent, after pleurisy or catarrhal affections.

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31. ℞.—Potassii Acetatis, ... gr. cxx.
Tincturæ Hyoscyami, ... ℥iv.
Infusum Buchu ad . . . . . ℥vj.

Misce et Solve.

Signetur.—A tablespoonful in water, thrice daily. Much used in bladder affections.

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32. ℞.—Acidi Carbolici, ... gr. xij.
Glycerini, ... ℥iv.
Aquam ad . . . . . ℥iij.

Misce et Solve.

Signetur.—The mouth to be washed out with a little on a piece of lint, or twenty drops (well diluted) to be taken thrice daily, as directed. For stomatitis.

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33. ℞.—Bismuthi Subnitratis, ... gr. ij.
Sodii Bicarbonatis, ... gr. ij.
Hydrargyri cum Cretâ, ... gr. i.
Pulveris Rhei, ... gr. i.
Pulveris Zingiberis, ... gr. i.

Misce.

Fiat pulvis, mitte tales, ... xij.

Signetur.—One powder, twice or thrice daily, as directed. For a child of three or four years—for gastric catarrh, &c.

34. ℞.—Extracti Pancreatis (Zymine), . . pulveres xxiv.
(Fairchild.)

Directions.—"Into a clean jar or bottle, pour a pint of fresh milk, ¼ pint of cold water, and one Peptonising powder. Set in water as hot as the hand can bear, and let it stand for twenty minutes, shaking occasionally. It may now be used." (*See* also directions supplied with each box.)

Peptonised gruel.—Take a pint of milk and a pint of boiling and well-boiled gruel. Mix. Add twenty grains of *bicarbonate of soda*, and a tablespoonful of the *liquor pancreaticus*. Place under a tea-cosy for half an hour; then bring the whole rapidly to the boil, and after flavouring, if necessary, it is ready for use.

For dyspepsia.

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35. ℞.—Glycerini Pepsinæ Acidi, ... ℥iv.

Signetur.—A teaspoonful, or two, as directed, after meals, in water.

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36. ℞.—Tincturæ Nucis Vomicæ, ... ℥ij.
Acidi Hydrochlorici Diluti, ... ℥ij.
Infusum Calumbæ ad . . . . . ℥vj.

Misce.

Signetur.—Shake the bottle, and take a tablespoonful in water, thrice daily, before meals. *Stomachic tonic.*

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37. ℞.—Quininæ et Ferri Citratis, ... gr. ccxl.
Syrupi Aurantii, ... ℥i.
Aquam ad . . . . . ℥vj.

Misce et Solve.

Signetur.—A dessertspoonful in water, thrice daily. *Tonic.*

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38. ℞.—Sodii Bicarbonatis, ... gr. cxx.
Infusi Calumbæ, ... ℥vj.

Solve.

Signetur.—A tablespoonful in water, thrice daily, before meals. Used in atonic dyspepsia.

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39. ℞.—Magnesii Sulphatis, ... gr. ccxl.
Vini Aloes, ... ℥i.
Aquam ad . . . . . ℥ij.

Misce.

Signetur.—The draught to be taken in the early morning, in half a tumbler of water. For "biliousness."

Or

℞.—Hydrargyri Subchloridi, ... gr. ½.
Extracti Rhei Compositi, ... gr. iij.

Misce.

Fiat pilula, mitte tales sex.

Signetur.—One pill every other night, followed by a dessertspoonful of Carlsbad salts in half a tumbler of hot water, in the morning. For "biliousness." *Hepatic dyspepsia.*

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40. ℞.—Bismuthi Subnitratis, ... gr. viij.
Sodii Bicarbonatis, ... gr. vj.
Pulveris Rhei, ... gr. iv.
Pulveris Cinnamomi Compositi, ... gr. ij.

Misce.

Fiat pulvis, mitte tales, ... xii.

Signetur.—One powder, thrice daily, before meals. Much used in gastric catarrh. (The same powders may be prepared in effervescing granules.)

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41. ℞.—Bismuthi Subnitratis, ... gr. cxx.
Sodii Bicarbonatis, ... gr. cxx.
Acidi Hydrocyanici Diluti, ... ℥i.
Glycerini, ... ℥i.
Aquam ad . . . . . ℥vj.

Misce.

Signetur.—Shake the bottle thoroughly, and take a tablespoonful in water, thrice daily, before meals. For irritable dyspepsia.

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42. ℞.—Extracti Nucis Vomicæ, ... gr. ½.
Extracti Belladonnæ, ... gr. ½.
Extracti Rhei, ... gr. ii. *vel* iij.

Misce.

Fiat pilula, mitte tales, ... xxiv.

Signetur.—One pill after dinner. Used in dyspeptic conditions.

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43. ℞.—Acidi Nitrohydrochlorici Diluti, ... ℥ij.
Infusum Quassiæ ad . . . . . ℥viij.

Misce.

Signetur.—A dessertspoonful, or tablespoonful (as directed), thrice daily, in water, before meals. Much used in hepatic, and other forms of dyspepsia. Tonic.

Or

44. ℞.—Acidi Nitrici Diluti, ... ℥ij.
Succi Taraxaci, ... ℥iss.
Tincturæ Cardamomi Compositæ, ... ℥vj.
Aquam Carui ad . . . . . ℥vj.

Misce.

Signetur.—A tablespoonful in water, thrice daily, before meals

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45. ℞.—Pilulæ Hydrargyri, ... gr. i.
Pilulæ Rhei Compositæ, ... gr. iv.

Misce.

Fiat pilula, mitte tales sex.

Signetur.—One pill every night, or on alternate nights, as directed. For hepatic dyspepsia, &c.

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46. ℞.—Ferri Sulphatis Exsiccatæ, ... gr. ½.
Extracti Nucis Vomicæ, ... gr. ¼.
Extracti Hyoscyami, ... gr. ij.
Extracti Aloes Socotrinæ, ... gr. ij.

Misce.

Fiat pilula, mitte tales, ... xxiv.

Signetur.—Two pills at night, as directed. For chronic constipation.

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47. ℞.—Pilulæ Hydrargyri, ... gr. ½.
Extracti Colocynthidis Compositi, ... gr. iij.
Extracti Belladonnæ, ... gr. ½.

Misce.

Fiat pilula, mitte tales sex.

Signetur.—One or two pills at night, as directed. For constipation.

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48. ℞.—Bismuthi Subnitratis, ... gr. cxx.
Tincturæ Opii, ... ℥iss.
Tincturæ Catechu (*vel* Kino), ... ℥i.
Misturæ Cretæ ad . . . . . ℥vj.

Misce.

Signetur.—Shake the bottle well, and take a tablespoonful in water every three or four hours, as directed. For diarrhœa.

(Sedative mixtures, as ℞ 41, may also be prescribed; or the opium may be omitted, if necessary, in the above ℞ 48.)

49. ℞.—Bismuthi Subnitratis, ... gr. lxxx.
Tincturæ Camphoræ Compositæ, ... ℥i.
Syrupi Simplicis, ... ℥ss.
Misturæ Cretæ ad . . . . . ℥ij.

Misce.

Signetur.—Shake the phial well, and give a teaspoonful in water every third or fourth hour, if necessary. For diarrhœa in children.

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50. ℞.—Bismuthi Subnitratis, ... gr. ij.
Sodii Bicarbonatis, ... gr. ij.
Hydrargyri cum Cretâ, ... gr. i.
Pulveris Zingiberis, ... gr. i.

Misce.

Fiat pulvis, mitte tales, ... xij.

Signetur.—One powder thrice daily. Used for catarrhal diarrhœa in children.

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51. ℞.—Tincturæ Opii, ... ℥iss.
Acidi Sulphurici Diluti, ... ℥iij.
Spiriti Chloroformi, ... ℥ij.
Aquam Menthæ Piperitæ ad . . . . ℥vj.

Misce.

Signetur.—A tablespoonful in water every four hours, if necessary—as directed. For diarrhœa.

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52. ℞.—Cupri Sulphatis,
Extracti Opii, āā, ... gr. ½.
Pulveris Ipecacuanhæ, ... gr. ij.
Extracti Hæmatoxyli, ... gr. ij.

Misce.

Fiat pilula, mitte tales, ... xxiv.

Signetur.—One pill every six hours. For diarrhœa.

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53. ℞.—Fellis Bovini Purificati, ... gr. ij.
Extracti Taraxaci, ... gr. ij.

Misce.

Fiat pilula, secundum artem, mitte tales, . . xxiv.

Signetur.—Two pills, twice daily, after meals. For deficient secretion of bile in cirrhosis of the liver, &c.

54. ℞.—Exalgine, ... gr. xxxvi.
Spiriti Vini Rectificati, ... q. s.
Aquam ad . . . . . ℥vj.

Solve.

Signetur.—A tablespoonful in water every second or third hour. For neuralgia.

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55. ℞.—Ammonii Carbonatis, ... gr. xxxvj.
Ammonii Iodidi, ... gr. lx.
Syrupi Tolu, ... ℥i.
Aquam ad . . . . . ℥vj.

Solve.

Signetur.—A tablespoonful in water every three or four hours. Used in catarrhal pneumonia, &c.

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56. ℞.—(Blaud's pills).
Ferri Sulphatis,
Potassii Carbonatis, āā . . . . . gr. iiss.
Tragacanthæ, ... q. s.

Misce.

Fiat pilula, mitte tales, ... c.

Signetur.—Two pills (then three), thrice daily, after meals. Much used in anæmic conditions. One-fiftieth of a grain of arsenic (acidi arseniosi gr. $\frac{1}{50}$) may be added to each pill. (The pills should always be freshly made.)

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57. ℞.—Magnesii Sulphatis, ... gr. dccxx.
Ferri Sulphatis, ... gr. xxiv.
Acidi Sulphurici Diluti, ... ℥ij.
Syrupi Zingiberis, ... ℥i.
Aquam Menthæ Piperitæ ad . . . . ℥vj.

Misce et Solve.

Signetur.—A tablespoonful (well diluted), twice or thrice daily, between meals. For anæmic conditions, constipation, &c.

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58. ℞.—Tincturæ Colchici Seminum, ... ℥iij.
Tincturæ Aconiti, ... ℥i.
(*vel* Tincturæ Veratri Viridis), ... ℥i.
Tincturæ Aurantii, ... ℥iv.

Misce.

Signetur.—A small teaspoonful in water, every four or six hours, as directed. Used in very acute gout. (Smaller doses in less sthenic cases.)

Or

℞.—Extracti Colchici Acetici, ... gr. ½.
Pulveris Ipecacuanhæ Compositi, ... gr. i.
Extracti Colocynthidis Compositi, ... gr. iij.
Extracti Gentianæ, ... q. s.
Misce.
Fiat pilula, mitte tales, ... xij.

Signetur.—One pill at bed time. Used in gout.

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59. ℞.—Atropinæ, ... gr. i.
Morphinæ Hydrochloratis, ... gr. viij.
Aquæ, ... ʒi.
Misce.

Signetur.—Poison. For external application on lint. Used in gout.

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60. ℞.—Sodii Salicylatis, ... gr. cxx.
Sodii Bicarbonatis, ... gr. cxx.
vel Potassii Iodidi, ... gr. lx.
vel Potassii Acetatis, ... gr. cxx.
Syrupi Aurantii, ... ʒi.
Aquam ad . . . . . ʒvj.
Misce et Solve.

Signetur.—A tablespoonful in half a tumbler of water, thrice daily. For rheumatism, &c.

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61. ℞.—Hydrargyri cum Cretâ, ... gr. ½.
Sacchari Purificati, ... gr. ij.
Misce.
Fiat pulvis, mitte tales, ... xxiv.

Signetur.—One powder thrice daily. For syphilis in infants.

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62. ℞.—Potassii Iodidi, ... gr. lx.
Liquoris Hydrargyri Perchloridi, ... ʒiss.
Decoctum Sarsæ ad . . . . . ʒvj.
Misce et Solve.

Signetur.—A tablespoonful in water, thrice daily, between meals. Much used in syphilis.

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63. (Catarrhal mixture for measles see ℞ 14).

64. ℞.—Acidi Carbolici, ... gr. iv.—x.
Olei Olivæ, ... ʒi.
Cretæ Triturate, ... gr. lx.
Misce.

Signetur.—An application for the face in small-pox; recommended by Professor Stewart, Edinburgh.

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65. ℞.—Acidi Carbolici, ... gr. viij.
Bismuthi Subnitratis, ... gr. cxx.
Mucilaginis Acaceæ,
Aquæ Lauro-cerasi, āā, ... ʒi.
Misce.

Signetur.—A teaspoonful in water, every hour or two, for the vomiting and diarrhœa of cholera (Bartholow).

Preparations used in Eczema.

(From Dr. Allan Jamieson).

Oscar Lassar's paste.

66. ℞.—Acidi Salicylici, ... gr. x.
Vaselini, ... ʒss.
Zinci Oxidi, ... ʒij.
Pulveris Amyli, ... ʒij.
Misce leniter terenda pasta.

Ihle's paste.

℞.—Resorcini, ... gr. x.—xl.
Lanolini,
Vaselini,
Zinci Oxidi,
Pulveris Amyli, āā, ... ʒii.
Misce.

Unna's glycerine jelly.

℞.—Gelatinæ, ... 15·0 per cent.
Zinci Oxidi, ... 10·0 ,,
Glycerini, ... 30·0 ,,
Aquæ, ... 40·0 ,,

"These ingredients are cautiously melted and combined, and to the mass two per cent. of sulpho-ichthyolate of ammonia is added."