

STEAMBOATS AND CEMETERY VAULTS ARE NOT BUILDINGS.

A New York court holds that where the Civil Damage Law forbids the selling of liquor under certain circumstances in a "building or premises," it does not apply to a steamboat where liquor is sold. The learned judge likened the steamboat to a vault in a cemetery, which he said was not a "building" in the sense meant by the statute against burglary, although it might be above ground.

PIGEON SHOOTING IS NOT CRUEL IN PENNSYLVANIA.

A Pennsylvania statute provides that any person who shall wantonly or cruelly ill-treat, overload, beat or otherwise abuse any animal shall be deemed guilty of a misdemeanor, but the Supreme Court has just held that this does not apply to a member of a gun club who, at a pigeon shooting match, shoots at and wounds a pigeon set loose from a trap, if it is immediately killed when its wounded condition is made known. The Court said:

From the facts found by the jury, the defendant has merely been punished for want of skill. It is doubtless true that much pain and suffering is often caused to different kinds of game by the unskillfulness of sportsmen. A squirrel badly wounded, may yet crawl to its hole and suffer for many hours or days and die. So with birds. They are often badly wounded and yet manage to get away only to suffer. It was not pretended that the Act applied to such cases. The sportsman in the woods is not responsible for the accuracy of his aim under the Act of 1869. At the same time it is manifest that much suffering would be spared wild game if sportsmen were better trained. Skill in shooting upon the wing can only be gained by practice. It is not so with inanimate objects. There accuracy of aim can be acquired by shooting at a mark. It is conceded that the sportsman in the woods may test his skill by shooting at wild birds. Why then may he not do the same with a bird confined in a cage and let out for that purpose? Is the bird in the cage any better or has it any higher rights than the bird in the woods? Both were placed here by the Almighty for the use of man.

In accordance with this reasoning a conviction in the trial court was set aside.

MEDICAL PROGRESS.

Therapeutics and Pharmacology.

THE TREATMENT OF TYPHLITIS.—In the earliest stage, absolute rest in bed, entirely liquid food, and a sedative mixture are necessities. I have generally used the liquor opii sedativus (B. P.), and occasionally joined with it some tincture of belladonna; nepenthe has also proved very valuable on two or three occasions. If the pain be *very* severe, a hypodermic injection of morphine will relieve it for a time, and I have found it disappear "for good" after one injection. A mustard-leaf may be applied to the seat of the pain,

and followed up by a linseed poultice every two hours, or a hot fermentation or spongopilin if the poultice be too heavy. A few drops of brandy or other spirit sprinkled on the flannel on the side which will touch the skin often takes away pain successfully. It is well in two or three days' time to administer a fair-sized enema of soap and water, and unless the bowels are moved of themselves, this had better be repeated daily. With ordinary care it is quite harmless; it removes whatever may be in the sigmoid flexure, and it stimulates the colon to get rid of its contents, thus probably helping to empty the cæcum and withdrawing the cause of the inflammation. If the vomiting is troublesome, an effervescing mixture with hydrocyanic acid or small doses of lime-water, will be useful. For diet, a little broth, or beef-tea, or arrow-root, or Benger's food, given every two hours in two or three ounce doses will suffice. Milk I regard as not very good food in these cases; unless it be freely diluted with soda-water or lime-water, it is too apt to become a mass of hard curds in the stomach, which may prove very irritating to the inflamed bowel. With the cessation of pain, the lessening of the lump in the groin, and the general improvement in the patient, of course an improved diet and some changes in the medicine become needful. Bismuth, I have generally found to be serviceable in the later stage going on to convalescence. With the surgical varieties into which typhlitis may stray, I will not deal here, as I have no personal experience of them, nor will I touch on that debated question, removal of the appendix. —*Archives of Pediatrics.*

THE EFFECT OF CERTAIN DRUGS ON THE RENAL CIRCULATION.—DR. ALBANESE has published in an Italian journal some important researches on the effects of caffeine, chloral, and curare on the circulation in the kidney, by which he has been led to the conclusion that the amount of urine secreted is not directly proportional to the quantity of blood passing through the organ. When chloral alone was given there was a very marked increase in the volume of the kidney, though, as is well known, this drug has an exceedingly slight diuretic action; while curare, which has a marked diuretic action, was shown to cause no perceptible increase in the volume. When caffeine was introduced into an animal already under the influence of either chloral or curare, it immediately caused a decided increase in the size of the kidney, and at the same time induced marked diuresis. Nevertheless, the increase in size produced under these conditions was not enough to account for the large quantity of urine secreted. Dr. Albanese does not agree with Schroeder that caffeine contracts the renal vessels, but finds that its action is first to increase slightly the volume of the organ and then to

cause a slight dilatation of the vessels. As there appears to be no indication that the diuretic action of drugs is due to increase in circulation or in volume, he is inclined to refer it to some change effected in the renal epithelium.

THE TREATMENT OF IRRITABLE BLADDER.—The best internal medication is iodide of potassium in from ten to thirty grain doses every few hours with large quantities of hot, soft water. This often in the incipient stage will effect a cure in a few days and will give relief in a few minutes. The decoction of the triticum repens which has been so highly praised by some, I have been much disappointed in, as it has appeared to me to do nothing more than act as a diuretic. Tincture of belladonna in some cases is of benefit but cannot be relied upon. Keep the body warm; warm baths with shampooing is of great benefit. Some cases that in the early stages were particularly intractable have been cured by a few weeks' residence at Excelsior Springs, with a liberal use of those iron-manganese waters. Probably they change the nutritive processes that are always at fault, and at the same time wash out the bladder thoroughly by their diuretic action. Relapses are liable to occur, hence great care should be used both as to diet and hygiene, and the first symptoms of relapse promptly treated.—HALLEY, *Kansas City Medical Record*.

POMADE FOR ALOPECIA.—MONIN (*L' Union Médicale*, March 3, 1891), recommends a pomade composed of gallic acid 3 grams, castor oil 20 grams, white vaseline 40 grams, spirits of lavender 15 drops. To be thoroughly rubbed into the scalp night and morning.

CHOREA.—The physician is often at his wits' end to find some efficient remedy for chorea. Tilden claimed to have obtained great benefit by throwing a spray of ether for five or ten minutes along the spine, at the same time keeping up nerve nutrition by appropriate food and exercise. Clark, surgeon-in-chief of the police department in Newark, N. J., reported some time since in the *Times* an exceedingly aggravated case of chorea treated with entire success by antipyrin. Acting upon the hint, we have recently controlled in children from 5 to 10 years of age serious forms of chorea with 5-gr. doses of antipyrin, at first every four hours, and, as the condition improved, three times a day. Very likely there are conditions of the system which would prevent the curative action of the drug, but in these cases it was certainly very effective, acting as a positive curative agent. That this drug is something more than an antipyretic and antispasmodic is seen in its action in renal spasm, the result of calculi, in which it not only controls the spasms but, continued in 5-gr. doses for several days, causes the

uric acid and the sand to disappear from the urine.—*N. Y. Med. Times*.

Medicine.

EHRlich's TEST IN TYPHOID FEVER.—C. E. SIMON (*Johns Hopkins Hosp. Bull.*, 1890, 93) refers to the nature of the diazo compounds, and their tendency to enter into combination with aromatic bodies, and cites the first experiments of Ehrlich while endeavoring to discover some of these aromatic bodies in the urine. Owing to the controversy which arose regarding the diazo reaction, especially as to its diagnostic import in typhoid fever, the test has come to be regarded by many as a medical curiosity of no clinical value whatever. The author, however, is convinced by his experience that the original work done by Ehrlich is not appreciated, since his own results fully coincide with those which Ehrlich obtained. After explaining the chemical nature of the reaction as far as it is understood, and the methods which Ehrlich advocated, he details the modification which he has found most convenient as well as most delicate. Two solutions are made, one of 50 cc. of hydrochloric acid in 9,950 cc. of water, and this saturated with sulphanic acid; the other of a ½ per cent. solution of sodium nitrite. To make the test, 40 cc. of the first solution is thoroughly agitated with 1 cc. of the second. A few cc. of this is next thoroughly shaken in a test-tube with an equal quantity of urine. One cc. of ammonia is now allowed to run down the side of the test-tube, forming a colorless zone above the mixture, and at the juncture of the two a more or less deeply colored ring will be seen, the slightest carmine tint—the characteristic of the diazo reaction—being made out by contrast with the colorless layer above and the yellow urine below. Various plays of color may appear in different urines, but in that of typhoid fever there is produced a red coloration, which may vary from an eosin to a deep garnet. Simon has examined the urine of almost every disease which has occurred in the wards of Johns Hopkins Hospital, but has observed the reaction only in cases of typhoid fever and phthisis pulmonalis. He has had no opportunity of searching for it in cases of contagious fevers, in which Ehrlich has occasionally found it present.

The report now made is based upon observations in thirty-six cases of typhoid fever, and the details of the examinations of these are given. The results which he obtained lead him to conclude that, with the methods of examination given by Ehrlich, the reaction may be obtained without difficulty in typhoid fever from the fifth to the thirteenth day of the disease, and that with his own modification it may still be seen as late as the twenty-second day. Its absence from the fifth to the ninth day indicates a very mild case, excepting in children, although this rule is prob-

ably not an absolute one. As it occurs previously to the appearance of the rash, it is a very useful aid in the diagnosis in typhoid fever.—*American Journal Med. Sciences.*

CATARRH TREATED BY PEROXIDE OF HYDROGEN AND ARISTOL.—The *Pharmaceutical Era*, March, has a note by the editor to the effect that aristol, dissolved in the lighter petrolatum products, has helped him in a considerable number of difficult cases of naso-pharyngeal catarrh. The proportion of the aristol used has not exceeded 10 grs. to the ounce. He begins the treatment by using hydrogen peroxide, in a weak solution, by means of an atomizer. This as a preliminary cleansing measure is beneficial. It is to be followed with the aristol solution as a spray, by which the affected parts are protected as by an antiseptic oily covering. Aristol is harmless in the strength above indicated, and it may safely be prescribed to the patient for home use. The results of this treatment have been the re-establishment of a healthy mucous membrane and a reduction of the catarrhal flow. The cleansing power of the peroxide is admitted on every hand, and favors the more thorough action of drugs than if they are immediately applied.

Surgery.

INDICATIONS FOR TREPHINING THE MASTOID PROCESS.—DR. SCHWARZE (*Deutsche militärärztl. Zeitschrift*, Heft vii, 1890) gives the following indications for opening up the cells of the mastoid process: 1. In recent inflammation of this process with retention of pus in its cells, when the local application of ice and superficial incision have failed to reduce the swelling, pain and fever. 2. In cases of secondary inflammation of the mastoid process, the external meatus should in the first place be emptied of any retained pus. If in adult patients this treatment, together with the application of ice, fail after a week's trial, recourse should be taken to operative treatment. 3. The mastoid process should be trephined in cases of chronic suppuration with repeated swelling, superficial abscess, or fistula, and spreading of the pus to the neck, external meatus, or pharynx, even when there are no apparent symptoms indicative of immediate danger. 4. The mastoid process, even when healthy at its surface, should be opened up in cases of retained pus and cholesteatoma, on the first appearance of symptoms pointing to dangerous complications in the middle ear. 5. The operation should be performed for the prevention of fatal consequences in cases of incurable foul suppuration in the middle ear, although no other symptom may present itself save a persistent ill odor.—*Brit. Med. Journal.*

Bacteriology.

THE ALKALOID OBTAINED FROM THE TUBER-

CLE BACILLUS.—Great interest is naturally attached to the various experiments which have been made in regard to the pathological chemistry of the tubercle bacillus. Although we are now in possession of a pretty full knowledge of the mode of action of the products of the tubercle bacilli as exhibited by the recent experiments made in all parts of the world with tuberculin, we as yet know comparatively little of the chemistry of this substance. An alkaloid was obtained from the products of the anthrax bacilli by Dr. Sidney Martin, and PROFESSOR ZUELZER has succeeded in obtaining a similar body from the bacillus of tuberculosis. A short account of Zuelzer's mode of isolating the alkaloid is given in the *Wiener Medicinische Wochenschrift*, No. 10, 1891. The entire contents of the tubes in which the pure cultures were made were repeatedly treated with hot water acidulated with hydrochloric acid. The solution was filtered, evaporated, and then several times precipitated with platinum chloride; the double salt decomposed by sulphuretted hydrogen, and the liquid again filtered and evaporated to dryness. In this way an almost white crystalline salt was obtained, which was easily soluble in hot water, but with great difficulty in cold. Its solution was light yellow in color. After keeping it for some time the dry salt assumed a light brown color. The chloride when injected into rabbits and guinea pigs exhibited a characteristic toxic action; about one centigram injected subcutaneously produced after from three to five minutes an increase in the frequency of respiration, the movements reaching 180 per minute. This continued for about a quarter of an hour, when the rate gradually became slower. The temperature rose in two out of the ten observations from normal to 102.2° F. Another constant symptom was well-marked protrusion of the eyes, which also appeared bright and shining, with somewhat dilated pupils. The sclerotic was considerably injected. It was remarkable that the protrusion of the eye was more marked on the side on which the injection had been made than on the other. All these appearances disappeared in from fifteen to twenty minutes. Toxic symptoms only showed themselves in three rabbits, and these had received somewhat larger doses, between two and three centigrams having been administered. Death usually occurred somewhere between the second and fourth days. At the site of injections there was considerable redness, and small hæmorrhages were found in the muscles immediately beneath. Small effusions of blood were also found in the mucous membrane of the stomach and small intestine. In two cases effusion occurred into the abdominal cavity. The brain was, as a rule, soft and congested. Almost precisely similar results followed the injection of the alkaloid into the conjunctiva.—*The Lancet.*