DIPHTHERIA.

JOHANNSEN (Liban).—**Prophylactic against Diphtheria.** *Petersburg Med. Wochenschr.*, 1887, No. 37.

GARGLING with permanganate of potash. **Michael.**

MERCIER.—Diphtheritic Angina: its Cure by Chloral. *Besançon*, 1887.

THE success of the treatment does not depend entirely on the employment of chloral, but principally on the way it is administered, viz., in small doses every half-hour, so as to cause the part affected to be constantly impregnated with it. An emetic is administered first, and syrup of chloral then given in spoonfuls, up to two, three, or five grammes, according to the age of the children.

The chloral separates the false membranes in a very short time, and has been the means of curing fifteen cases out of a hundred. **Joal.**

SNOW, HERBERT L. (Bayswater).—**Sulphurous Acid in Diphtheria.** *British Medical Journal*, *October* 8, 1887.

THIS remedy causes a rapid disappearance of the exudation, with corresponding improvement in the patient's general condition. Dose, &c.: in severe cases a drachm should be given to an adult every half hour; in ordinary cases every two hours. The only drawback is the choky sensation produced by the vapour. A large quantity of syrup ought to be given with the acid—say two or three ounces in an eight-ounce mixture. For young children it ought to be given in milk. Chlorate of potash may be combined with it to promote healing of the ulcers. The author appears to have great belief in this remedy. **Hunter Mackenzie.**

ILLINGWORTH, C. R. (Clayton-le-Moors).—**The Biniodide of Mercury in Diphtheria.** *British Medical Journal*, *October* 22, 1887.

THE author recommends both the local and the internal use of the remedy. When the throat is clear of exudation he gives iron and chlorate of potash. If the vital powers be low, he recommends the biniodide of mercury, with a slight excess of iodide of potassium or of sodium, every two hours, alternating with a dose of iron every two hours. **Hunter Mackenzie.**

MAIN, ROBERT (East Ilsley).—**Biniodide of Mercury in Diphtheria.** *British Medical Journal*, *October* 15, 1887.

A BRIEF note descriptive of two cases successfully treated with a gargle of corrosive sublimate (1 in 4,000) and the internal administration of iodide of potassium. (As the writer states he also treated the patients with iron and chlorate of potassium, the evidence here adduced in favour of the biniodide of mercury is not quite conclusive.)

Hunter Mackenzie.

MOLONY, FITZ-JAMES (Porlock, Somerset).—**Arsenic in Diphtheria.** *British Medical Journal*, *October* 29, 1887.

ARSENIC is recommended, after the removal of the diphtheritic membrane

https://doi.org/10.1017/S1755145500160336 Published online by Cambridge University Press

as a local application on account of its antiseptic properties. The liquor arsenicalis may be thus used every three or four hours.

Hunter Mackenzie.

ROESE (Hamburg).—**Turpentine in the Treatment of Diphtheria.** *Therap. Monatschr., October*, 1887.

SIXTY cases thus treated showed good results. **Michael.**

SMITH, E. STANLEY (London).—**Diphtheria.** *British Medical Journal, October* 22, 1887.

AN enumeration of the various local and general remedies which the author has found of service in this disease, and which, according to the author's own statement, are neither new nor original.

Hunter Mackenzie.

CASADESUS, ROQUER. — Diphtheritic Pharyngo-Laryngitis; Tracheotomy; Cure. *Revista de Laringologia, Otologia y Rinologia, October*, 1887.

RELATION of a case in which hydrochlorate of pilocarpine, essential oil of turpentine, syrup of ipecacuanha, vapours of eucalyptus, and restorative broths were used, notwithstanding which the asphyxiative period of croup appeared, and it became necessary to perform tracheotomy. General medication was then continued, lemon juice was locally used, and the patient cured, although a small broncho-pneumonic focus appeared. The author finishes his observation with a few remarks upon the use of pilocarpine, and upon the performance of tracheotomy in diphtheria. **Sota y Lastra.**

BARRET, A. E. (London).—**Diphtheria Circumscripta.** *British Medical Journal, October* 15, 1887.

THE writer remarks upon the similarity between the herpetic form of exudative pharyngitis and diphtheria; the former is characterized by greater pain, and is less fatal than the latter. **Hunter Mackenzie.**

FRASER, G. R. (Wark-on-Tyne).—**Diphtheria Circumscripta, or Sandringham Sore Throat.** *British Medical Journal, October* 1, 1887.

A SHORT note, with descriptive cases of several of these complaints. The author considers it as being probably closely related to diphtheria, but without the local exudation of the latter; laryngeal symptoms are absent, and the danger to life is slight. All the cases recovered under alteratives and saline purgatives, and subsequently of tonics. **Hunter Mackenzie.**

ATKINSON, F. P. (Surbiton).—**The Cause or Causes of Diphtheria.** *British Medical Journal, September* 10, 1887.

IN a brief letter to the Editor, the author expresses his opinion that "it (diphtheria) often arises in country districts from defective sanitary arrangements, then gets carried into towns, and there spreads right and left by actual contact or infection." **Hunter Mackenzie.**

https://doi.org/10.1017/S1755145500160336 Published online by Cambridge University Press