EAR.

Schmiegelow.—*A Case of Phlebitis of the Sinus with Pyæmia.* "Rev. Hebd.," May 13, 1905.

Report of a case of a severe type, but one in which recovery ensued owing to timely intervention. The radical mastoid operation was performed and the jugular vein was ligatured in the neck.

Albert A. Gray.

Laurens.—*Mastoid Operations in the Newly-born.* "Rev. Hebd.," May 13, 1905.

Report of a case in a child three weeks old. Recovery.

Albert A. Gray.

THERAPEUTIC PREPARATIONS.

EUDRENINE. (Parke, Davis and Company, 111, Queen Victoria Street, London, E.C.)

Eudrenine contains $\frac{1}{6}$ of a grain of beta-eucaine hydrochloride and $\frac{1}{2000}$ of a grain of adrenalin chloride (takamine) to each c.c. (16·9 minims). It has been found that both minor and major surgical operations can be performed without general anæsthesia, and practically without bleeding by the use of a solution consisting of 0·2 per cent. of beta-eucaine dissolved in physiological sodium chloride solution, together with the $\frac{1}{1000}$ of a grain of adrenalin in each 10 c.c. of the liquid. Eudrenine is a concentrated form of this anæsthetic solution. It is well known that the local anæsthesia produced by cocaine or eucaine alone is very transient, for the reason that the drug is rapidly absorbed into the general circulation, frequently with toxic effects owing to the comparatively large quantity that must be injected. To overcome these difficulties the combination of adrenalin with the anæsthetic has been extensively resorted to in recent years. When adrenalin is injected into the tissues it has the immediate effect of rendering the part almost entirely bloodless, a condition which lasts for a considerable time (sometimes for several hours). In other words, the circulation of the blood in the part is practically suspended. As might be expected, the injection of adrenalin, in conjunction with an anæsthetic, localises the action of the latter by preventing its immediate absorption into the blood; thus local anæsthesia is not only secured by the use of a much smaller quantity of cocaine or eucaine, but it lasts for a longer time, while the chance of poisoning is very much reduced as the result of the small amount of anæsthetic injected and its very slow absorption. It may therefore be said that the addition of adrenalin to cocaine or eucaine greatly increases and prolongs the anæsthetic effects of the latter, so that weak solutions act as well as, or even better than, stronger solutions without the adrenalin. Eudrenine has been produced to meet the demand for a local anæsthetic and hæmostatic for use in general surgery and in our own special departments of practice. For small surgical operations the solution may be used undiluted, but where a large area requires to be anæsthetised, it may be diluted with four volumes of physiological sodium chloride solution.

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GLYCOBENPHENE. (Henry Heil Chemical Co., St. Louis, U.S.A.)

Glycobenphene has been found of great efficiency as an antiseptic germicide, and healing agent, powerful and yet non-irritating. While it is an ideal dressing for wounds it has also been found to be an almost certain remedy in the various forms of eczema. Borobenphene, manufactured by the same firm, is also a most reliable antiseptic, used extensively as a dressing for wounds, as a gargle, and by spray in diseases of the throat, and as an internal antiseptic. The London agents are Messrs. F. Newbery and Sons, Ltd., 27 and 28, Charterhouse Square, E.C.

"TABLOID" QUININE, CAMPHOR, AND ACONITE (Burroughs Wellcome & Co., London.)

This tabloid consists of: quinine bisulphate, gr. $\frac{1}{4}$ (0·016 gm.); camphor, gr. $\frac{1}{4}$ (0·016 gm.); tincture of aconite, min. 1 (0·059 c.c.). The preparation is a valuable diaphoretic and antipyretic in the prevention or treatment of catarrh and influenza. It is also indicated in inflammatory conditions where aconite reduces the rate and force of the heart, and assists quinine and camphor in promoting diaphoresis and combating fever. The "tabloid" product is convenient and portable, allowing of easy administration, and disguising the bitter taste of quinine. The dose is one every half-hour, till diaphoresis is produced and the pulse slowed.

REVIEW.

Adenoids: By WYATT WINGRAVE, M.D., Physician and Pathologist, Central London Throat and Ear Hospital; late President British Laryngological, Rhinological, and Otological Association. Paris, London, and Madrid: Baillière, Tindall and Cox, 1904.

This work forms Number 9 of a medical monograph series, and the editor states that the aim of such works is to sketch in brief compass the chief features of given subjects of every-day interest to students and practitioners. Dr. Wyatt Wingrave further aims at removing some of the misconceptions which surround the subject.

The work will form a valuable contribution to the series, because, although the whole subject is treated within the comparatively limited space of one hundred and twenty-one pages, the student or practitioner will gain much valuable and practical information from its perusal. Not only are the clinical aspects of the subject presented in a very readable form, as might have been expected from one who has had so much experience, but the author has treated the subject in a thoroughly scientific manner. Thus adenoids are not looked upon in this work as merely isolated structures, but rather as tissues playing an important part with others in diseases of the upper respiratory tract. The chapters devoted to anatomy, pathology, and morphology are specially deserving of attention and appreciation, and the operative details have been very carefully attended to. Altogether the work is to be thoroughly recommended, and will doubtless be greatly appreciated by students and practitioners. Mr. Hotten George has contributed a useful chapter upon the question of anæsthetics.

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