

lessened. Dr. Erlenmeyer believes that the failure is probably due to insufficient stretching of the nerves.

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ABSINTHISM.—M. Lancereaux, in a recent communication to the Paris Academy of Medicine, Sept. 7th (reported in *La France Médicale*), in which he states the conclusion derived from his investigations that in the syndrome of acute absinthism we do not have the genuine epileptic attack, but rather the convulsive phenomena of hysteria, and that this resemblance between hysteria and absinthism exists not only for the acute form of the latter, but also for its chronic form.

M. Dujardin-Beaumetz referred to his own experiments on pigs (see last number of this JOURNAL), to some of which he had also administered absinthe. In these latter he had developed symptoms of excitement, but nothing like epilepsy.

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DUBOISIA IN EXOPHTHALMIC GOITRE.—M. Dujardin-Beaumetz has substituted duboisia in hypodermic injection for atropia, in the treatment of exophthalmic goitre. In the two cases in which he has employed it he obtained a great decrease in the palpitations and the vascular pulse. He noticed, moreover, a ready cumulative action of the drug, although he used quite small doses, from a quarter to a half a milligram, or more. A few days sufficed to develop indubitable signs of intoxication analogous to that produced by belladonna. The solution employed was as follows: neutral sulphate of duboisia, .01; distilled cherry laurel water, 20. Each charge of the syringe, containing one cubic centimetre, contained half a milligram of the duboisia salt.

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DIRECT CAUTERIZATION OF A NERVE FOR NEURALGIA.—Dr. Augustus Brown reports to the *British Med. Journal*, Nov. 6th, a case of very severe neuralgia of many years' standing, relieved at once by a rather novel operation. The pain was paroxysmal and was located in the mental nerve on the right side just at the point of its exit from the foramen; from there it extended backward to the front of the ear; then upward to the vertex, forward to the frontal nerve, down the right side of the face and neck to the arm, and backward to the scapula. The gum above the painful point was congested and harder than on the opposite side; the tongue was white and tremulous. All the teeth were gone (the patient

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was a lady, aged 56), and a portion of the alveolus had been extracted on the idea that the pain was due to pressure from a buried dental snag, but this proved not to be the case.

Dr. Brown made an incision along the lower border of the jaw and dissected upward till he reached the mental foramen. Then he ran a red-hot steel wire a quarter of an inch or more into the foramen and completely destroyed the nerve for that distance. Considerable hemorrhage followed the operation, but the wound healed kindly and the patient was completely restored to health and perfect freedom from pain. The doctor never witnessed a more satisfactory result from an operation, and he thinks that in the actual cautery of nerves is a remedial measure on which, in many cases, we can depend when others fail, and one that, in many instances, may supersede nerve-stretching, as well as possibly be of great benefit in tetanus.

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TREATMENT OF ASTHMA.—Dr. R. B. Faulkner of Alleghany, Pa., claims, *N. Y. Med. Record*, Sept. 25, to have succeeded, in cases of spasmodic asthma that were resistant to other treatment, by the use of local counterirritation over the course of the pneumogastrics in the neck, with tincture of iodine, even to producing a blister. He also gives iodide of potash internally. This treatment not only appears to afford quick relief from the paroxysms, but to prevent their return. All the cases on which he has tried this treatment since the idea occurred to him, three in number, have had the same relief.

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URECHITES SUBRECTA.—Dr. Isaac Ott, *Therapeutic Gazette*, Oct. 15th, publishes his investigation on the physiological action of Urechites subrecta, a Jamaica plant passing under the local name of nightshade, which had been already chemically described by J. J. Bowrey, Government chemist of Jamaica. The latter found it to contain three active substances in its poisonous leaves, which he named urechitoxin, amorphous urechitoxin and urechitin, all glucosides. The last-named one includes all the poisonous principle, the urechitoxin being a chemically-changed urechitin.

Dr. Ott's experiments were performed on cats, frogs and rabbits. Its general effects had been already described by Bowrey, including vomiting, incoördination, weakness, sweating, convulsive movements, salivation, etc., and therefore most of his own experiments were mostly directed to find its action on the various