was to-day ordered to have ten grains of quinine, and chicken-diet to-morrow. After this, the fever passed off, and he seemed to be doing well for some days.

July 29th. A globular fluctuating swelling was found at the wound of exit (behind). A trocar and cannula was introduced, and an ounce and a half of healthy pus evacuated. The abscess was apparently intermuscular. It was washed out with carbolised lotion, and dressed antiseptically.

July 31st. Drainage was established.

August 5th. For the last three days, his temperature had been irregular. The sinus, from the aperture of exit, extended to a point very close to the aperture of entrance; no communication, however, could be discovered by the probe; and water injected from behind did not escape in front. A drainage-tube was inserted. He was rather constipated. His urine was slightly albuminous.

August 8th. The carbolised lotion, when injected from behind, now escaped anteriorly. Temperature normal.

August 10th. The sinus was shorter, and becoming narrower at both apertures. His general health and spirits were excellent.

August 27th. The sinus having made but little progress, it was syringed out with equal parts of tincture of iodine and water. After this he made satisfactory progress, and on December 2nd was transferred as convalescent to Kasauli Station-Hospital. He completely recovered, and returned to duty, in excellent health.

REMARKS.—In the foregoing case, the following points would appear to be worthy of attention. It is remarkable that a Martini bullet, travelling at a speed practically equal to its initial velocity, should have passed directly from point to point, as described, without destroying the continuity or integrity of the intestinal canal. There were no bloody stools, no emphysema in the neighbourhood of the wound, no tenderness on pressure of the abdomen; and, after an interval of eight days from date of injury, a solid healthy stool was passed. The bullet most certainly passed in a direct line from aperture to aperture; since, apart from the fact that the Martini bullet does not pursue the erratic course frequently followed by the round ball, the probe showed, beyond all doubt, that the track of the bullet lay in a right line from the aperture of entrance to that of exit. That the kidney was perforated is equally evident, both from the position and direction of the wound, and from the occurrence of smoky urine directly after the injury, followed as this was by profuse hæmaturia at the period when secondary hæmorrhage would be expected to occur. When I state that I was, at the time of the affray, serving under Surgeon-Major Cotter, M.D., it will be readily understood that all treatment, etc., were employed in consultation with him, and that all measures adopted were either by his suggestion, or with his sanction and approval.

ON A NEW FORM OF CITRINE OINTMENT.

By BLENNERHASSETT ATTHILL, L.R.C.P.Lond., M.R.C.S.Eng.

ON referring to the new edition of the *British Pharmacopœia*, just published, it will be seen that the unguentum hydrargyri nitratis dilutum is ordered to be prepared with paraffinum molle, soft paraffin, the synonyms being petrolatum (its designation in the *Pharmacopœia* of the United States), petroleine, and unguentum paraffini. It is described as a semi-solid mixture, containing some of the softer or more fluid members of the paraffin series of hydro-carbons, usually obtained by purifying the least volatile portions of petroleum.

These characters do not, however, give us any standard of purity; and, beyond describing the melting point, we are left in ignorance as to what form of petroleum-jelly we should employ. The material purpose suggested by this innovation in the preparation of this particular ointment is clearly to obviate the destructive effects of decomposition, with its resulting rancidity, which obtained to a very objectionable extent in the old form of the dilute citrine ointment.

This hitherto has been prepared with lard, and sometimes even with an animal oil, such as neat's-foot or trotter oil; sometimes with fish oil, such as cod-liver oil—the latter serving to keep the ointment better and longer than the former, and being considered by some as more efficacious as a remedial agent. It has also been prepared with fresh butter; this also keeping fairly well.

As soon, however, as the Americans discovered the petroleum-jelly, and it was introduced into this country, it was hoped that it would supersede all these articles in the preparation and dilution of citrine ointment in particular; but utter disappointment was the inevitable result of the trial and the experiment, as rapid oxidation, decomposition, and rancidity set in, just as in the old form prepared with lard, etc.

On seeking the cause, and, after many inquiries and a few experiments, I discovered what I consider the cause of the decomposition to be. It is, in my opinion, due to the manufacture of the petroleum-jelly by some acid process, in the first place; and by the addition, as is the case of the majority of adulterated specimens coming to us from abroad, in the second place, of heterogeneous and spurious substances, such as resinous matters, perhaps honey, and probably other organic impurities, these additions giving a pretence of emolliency and consistency.

I at last hit upon an English preparation, a product of petroleum alleged to be pure, of the name of "Geoline," which I have found, after a considerable experience in its use, to be the best vehicle in the preparation of citrine ointment and oxide of zinc. I noticed recently a report on this preparation, which was as follows. "It possesses all the advantages claimed for it; under the most favourable circumstances for decomposition, we have found it to retain its purity."

These facts with regard to "geoline" I can quite endorse, after a practical experience of eighteen months in its use. I have found it in every way a perfectly efficacious and satisfactory medium in all ointments, but especially in preserving the citrine form, which is a great desideratum achieved. Not only does it blend admirably with the nitrate of mercury ointment, but it makes a stable zinc oxide ointment, which keeps for an indefinite length of time pure and good. The dilute citrine ointment, made with "geoline," keeps absolutely pure; is of a very firm consistency; pleasant in its use, having a nice jelly-like appearance; and about 75 per cent. is saved in price over lard. The melting point at which geoline liquefies is stated to be 105° Fahr., so that its consistency in ordinary use is one of its great advantages over many of the other more fluid preparations manufactured abroad, and sold in England under various fanciful names.

I am at present attempting some experiments, in mixing geoline with metallic mercury instead of lard, for unguentum hydrargyri fortius; and I further believe that, as this substance is a pure form of hydrocarbon, that, with nitric acid, it will make a more economical compound than with glycerine, either as a remedial or as an explosive agent.

THE REMOVAL OF SUPERFLUOUS HAIRS BY ELECTROLYSIS.

By GILBERT SMITH, F.R.C.S. Ed.,

Surgeon to the Birmingham and Midland Skin and Lock Hospital.

AMONG the various methods adopted for the removal of superfluous hairs, there are none so easy of performance, so painless in their operation, so certain in their destruction of the hair-papilla, and which leaves fewer traces of an operation on the surface of the skin, than electrolysis. Dr. Mechel, the oculist of the Missouri College, I believe, first introduced the operation for the treatment of trichiasis. To Drs. Hardaway of St. Louis, White of Boston, and Piffard of New York, we are indebted for the introduction and popularisation of electrolysis as a method of destroying hair.

The apparatus required for the operation consists of a galvanic battery of from ten to fifteen cells, a sponge electrode, a No. 14 needle, an electrode needle-holder, and two cord conductors, each a yard in length.

The needle, properly fixed in its holder, is connected with the negative, and the sponge with the positive, pole of the battery. The needle is carefully introduced into the follicle alongside the hair, which is used as a guide to the papilla, the moistened sponge-electrode being grasped in the patient's hand (the needle should be applied before the circuit is completed by the sponge-electrode, and the converse after the operation; that is, the sponge-electrode should be released before the needle is withdrawn, otherwise pain will be caused).

The needle is held in position from ten to thirty seconds, according to the size of the hair, until slight frothing is produced, or a wheal appears around the mouth of the follicle; the sponge-electrode is then loosened, and the needle withdrawn.

The hair should now be removed, and the ease with which it is extracted indicates the completeness of the operation. If the hair do not leave the follicle with the feeblest traction, the needle should be reintroduced one or more times. Shortly afterwards, slight redness and swelling are perceptible.

Under a strong lens, it is not difficult to introduce the needle directly into the follicle; but this is not absolutely necessary, as the requisite destruction occurs if the instrument be in its immediate