use, I should immediately cease injecting as soon as contraction of the uterus was set up. I proceeded further with it in this case, partly to thoroughly promote firm contraction, and partly to use up entirely the amount of fluid recommended by Dr. Barnes. In conclusion, I would observe, as this remedy is only upon its trial, that it would be for the welfare both of the public and the profession if all the unsuccessful, as well as the successful, cases in which it was used were published. Then it might be seen whether the results would be such as to justify its general adoption in these cases of hemorrhage.

GELSEMINUM SEMPERVIRENS AS A REMEDY FOR COUGH.

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No symptom in pulmonary complaints more frequently calls for treatment than cough. The skill and the resources of the physician are alike taxed by its persistency or its severity, by the failure of medicines to relieve, or by the intolerance of remedies by the patient. Any addition to our *Materia Medica*, therefore, which proves of real therapeutic value in the treatment of this symptom, calls for a patient investigation at our hands. I know that some will say, "Do not direct your attention too much to the treatment of cough in cases of pulmonary disease, and more especially in phthisis. Deal with the conditions which give rise to the cough, and trust, by so doing, to alleviate it." In most cases, however, this symptom is so urgent and so harassing that we must treat it. For this purpose, I believe we have in *Gelsemium sempervirens* a very valuable addition to our armamentarium. Of late this drug has received some attention in this country with reference to its action in nervous affections (see *BRITISH MEDICAL JOURNAL*, May 2nd, 1874, and September 18th, 1875; *Practitioner*, August 1875), but, so far as I know, little has been said with regard to its use in cough. I have administered it recently to a large number of patients suffering from pulmonary disease, as a cough sedative. The following cases will illustrate the results which have been obtained.

E. N., a young lady, aged 21, had a large vomica at the apex of the left lung. The rest of that lung was dull on percussion. Respiration was bronchial, and there was coarse crepitation both with inspiration and with expiration. The vocal resonance was bronchophonic. The upper lobe of the right lung was also the seat of limited softening. There was much troublesome cough, with copious expectoration. Tincture of gelsemium was administered in five-minim doses; this gave very great relief to the cough, which was most marked towards evening, the time at which the cough was most troublesome. The patient expressed great faith in the remedy, and preferred it to any other sedatives, of which she had had a great many. No bad effects were observed from its use. There was no nausea or sickness produced, and the appetite was not impaired.

N. T., a married lady, aged 30, had dulness on percussion over the upper half of the left upper lobe. Over the area of dulness there were bronchial breathing, fine crepitation, and bronchophony. She had a very irritable and spasmodic cough. The expectoration was very slight and mucopurulent. Eight-minim doses of tincture of gelsemium produced marked relief of both hacking and spasmodic cough. No unpleasant effect was produced by the remedy.

J. M., an unmarried woman, aged 26, had chronic phthisis in the second stage, over the whole of the left lung and the upper half of the right. She had an extremely irritable cough, especially in the night, which did not yield to any of the usual sedatives. Five-minim doses of tincture of gelsemium gave very great relief, and enabled the patient to get a fair amount of sleep.

J. H., an unmarried man, aged 35, had chronic phthisis in the third stage in the right lung. The deposit was scattered all over the left lung. His cough was very troublesome. Little relief was obtained from the usual remedies. Five-minim doses of tincture of gelsemium proved most useful in checking the cough. No unpleasant effects were noticed.

E. M., a young lady, aged 24, had congestion of the left apex, trachea, and larynx, and an excessively irritable cough, resisting all remedies general or local. Tincture of gelsemium in five-minim doses, combined with syrup of codeia, gave great relief.

J. G., an unmarried lady, aged 32, was subject to severe attacks of spasmodic asthma. Her attacks usually yielded best to bromide of potassium with belladonna; to this tincture of gelsemium was added, and the attacks were markedly much milder and of shorter duration. No unpleasant effects were observed.

A. B., a young lady, aged 23, had advanced phthisis. The cough was very troublesome. All the usual sedatives disagreed. Gelsemium gave relief to the cough, but could not be continued because of producing nausea.

These will sufficiently indicate the kind of cases in which I have found gelsemium useful. In some patients, when there existed much bronchial irritation, I have combined it with bromide of ammonium, tincture of squill, and syrup of codeia, and such a combination has often afforded very great relief. In no case, save the one last narrated, have I observed any unpleasant effect. In that, the nausea was only slight, but she was otherwise suffering so much that I did not think it right to persevere.

These results show that gelsemium has a marked power in subduing cough; that it acts probably as a nervous sedative; that it is useful when other sedatives have failed; that it seldom produces any unpleasant general effect; and that the kind of coughs in which it may be administered with advantage is very varied.

I believe further investigation will heighten our estimate of the value of this drug in dealing with so troublesome a symptom in the treatment of pulmonary complaints, and that a more extended acquaintance with its action will enable us to differentiate those forms of cough in which it is likely to be of most service. It is undoubtedly a remedy of no mean efficacy, and will, I feel sure, hold a permanent place in our list of *materia medica*.

SURGICAL MEMORANDA.

SYME'S OPERATION MODIFIED AND IMPROVED BY SAVING THE PERIOSTEUM OF THE OS CALCIS.

IN the *BRITISH MEDICAL JOURNAL* of the 2nd ult. is a paper by Mr. Joseph Bell of Edinburgh, in which he describes a modified and improved method of performing Syme's operation by saving the periosteum of the os calcis. I beg to inform Mr. Bell that Dr. G. H. B. McLeod, in the Glasgow Royal Infirmary, has performed Syme's operation exactly in the same way as Mr. Bell describes. From 1869 till 1873, I saw Dr. McLeod perform Syme's operation about fourteen times, in all cases saving the periosteum of the os calcis, and with the greatest success. Since that time, I had occasion to perform the operation four times. In all the cases, I saved the periosteum of the os calcis. All the cases did well; in two of them a considerable amount of new bone formed in the flap, making a splendid stump.

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THERAPEUTIC MEMORANDA.

TREATMENT OF WHOOPING-COUGH WITH CARBOLIC ACID INHALATION.

IN the *JOURNAL* of the 2nd ult., Dr. R. J. Lee has mentioned my name in connection with the employment of carbolic acid vapour in the treatment of whooping-cough. I am glad to have the opportunity of furnishing a concise account of the way in which it was used, and also of my experience of the remedy in question.

During the early part of the present year, I had under care about forty cases of the above affection (occurring amongst the children of officers connected with Her Majesty's Convict Prison, and not, as might be inferred from Dr. Lee's remarks, amongst the convict class). At the suggestion of Dr. Lee, I tried the inhalation of the vapour; but, owing to the number of cases on hand at the same time, and having only one inhaler on the spot, I was not enabled to apply the remedy separately to each case, as I should have wished. This difficulty was, however, in a measure, got over by having had two rooms placed at my disposal, the inner one of which was thoroughly impregnated with the vapour, made by boiling one part of acid with three of water. The little sufferers being then let into the apartment, the inhaler was kept in working order during the time they remained, generally about fifteen minutes; after which the door communicating with the outer room was thrown open. In this latter place, they were kept five minutes, and then, being well wrapped up, were despatched to their respective quarters; a distance which, at the most, did not exceed two minutes' walk. Great relief followed these inhalations; the distressing paroxysms accompanying the cough being especially alleviated; and the parents remarked that a good night's rest invariably followed after they had inhaled. This course of treatment was continued every other day for about five weeks, and proved eminently successful in all but two cases, in which