

that consequently quackery is rampant. Further, the number of qualified practitioners in proportion to the population is already large. In his annual address to the Sydney and New South Wales Branch of the British Medical Association, the Hon. Dr. J. M. Creed, the retiring President, referred to this subject; the number of medical practitioners who were arriving in Australia from all parts of the world for the purpose of settling in practice was, he said, disproportionate; "the hopes of many of these gentlemen," he said, "are fated to disappointment, for the number of medical men in proportion to the population is rapidly becoming so large that remunerative practice can be but the reward of very few of them." He added that whereas there was one medical practitioner to every 1,562 inhabitants in England, in New South Wales there was more than one to every 1,250, if the men practising without qualifications were included in the calculation.

#### THUNDERSTORMS AND LIGHTNING ACCIDENTS.

**MR. H. NEWMAN LAWRENCE**, Electrician to the Institute of Medical Electricity (24, Regent Street), writes that the Institute is very desirous to obtain authentic information concerning lightning accidents, whether fatal or otherwise. Electrical and physiological details are most required, but reliable general information is stated to be often very valuable, and will be gratefully received.

#### THE TREATMENT OF ECZEMA.

**DR. C. R. ILLINGWORTH** (Accrington) writes: The prescription given by Dr. Hawkins is lacking in one essential; it contains no antiseptic. For several years I had very good results with a mixture of equal parts of zinc ointment and glycerine, but since I made the preparation antiseptic with glycerine of borax I have effected much more rapid cures. The same ointment also gives great relief in pruritus ani, itself an eczematous or quasi-eczematous affection; whilst for acne rosacea and other allied affections of the skin it is (if there be any justification in the use of the term) an absolute "specific."

#### ON THE USE OF CODEINE TO RELIEVE PAIN IN ABDOMINAL DISEASE.

**MR. J. MATTHEWS** (Liverpool) writes: I read with much pleasure the paper on Codeine by Dr. Lauder Brunton in the JOURNAL of June 9th. I have now under treatment a lady who has recently ceased menstruating and who has suffered for nearly a year from vomiting attended occasionally by hemorrhage—hysterical vomiting and vicarious hemorrhage. She complained much of pain in various parts, specially under the lower edge of the ribs and over the ovaries. I had tried everything I thought likely to relieve her with little or no effect, when Dr. William Carter suggested codeine. We gave it in half-grain doses three times a day with very decided benefit. Contrary to the opinion expressed in the paper referred to, my impression is that it tends to constipate, and I add one grain of compound rhubarb pill to each dose.

#### A PIN PASSED PER ANUM IN FORTY HOURS.

**DR. J. McANDREW**, M.B. Ed. (Huddersfield) writes: A child aged 2 years was brought to me on June 4th by its father, who averred that it had swallowed a small pin about an hour previously. I carefully examined the mouth and fauces, but could discover no pin there. As the child seemed to be suffering no discomfort, I concluded that perhaps, unknown to the mother, it had dropped the pin from its mouth—in fact, that it had not swallowed the pin after all. However, I told the father to give the child plenty of solid food, very little liquid, and on no account to give a purgative. I also told him to have every stool examined carefully; this was done, and the result was that they found the pin embedded in a mass of feces passed on Wednesday morning, June 6th.

I merely note this case because, in the first place, it is not very common to find a sharp and somewhat lengthy body like a pin pass through the intestinal tract without producing any untoward symptoms; and in the second place because of the short time—about forty hours—that elapsed between its entrance and exit from the alimentary canal.

#### EUGENIA JAMBOLANA.

**DR. GEO. SUTTIE** (Detroit, Michigan, U.S.A.) writes: There appeared in the JOURNAL of May 5th a small paragraph headed "Jambul from the Dutch Indies," in which the botanical name was given as *syzygium jambolana*. Beneficial results were also recorded from the use of this drug in a case of diabetes mellitus, and the paragraph concluded by saying that "it is not clear whether this is the same plant as *eugenia jambolana*."

Since the members of the profession on both sides of the Atlantic are somewhat interested in this drug as a promising remedy in diabetes, it would be conducive to their intelligent understanding of the therapeutics of jambul to know that reports of its effects as given under the name of *syzygium jambolana* and that of *eugenia jambolana* relate to the same remedy, and can be incorporated in collective investigation.

The urgent necessity which exists for more stringent rules of botanical classification in order to get the infinity of names within bounds called for the fusion of the genus *syzygium* into *eugenia* by Bentham and Hooker when writing their *Genera Plantarum* (vol. i, part ii, page 719), and as this work is recognised as authoritative on taxonomy, jambul should now be known as *E. jambolana*, Lam.

Your readers may have access to either or all of the works mentioned below, and which can be consulted for a record of synonymy: De Candolle's *Prodrromus*, vol. iii, p. 259; Drury's *Useful Plants of India*, p. 421; Rosenthal's *Heil-Nutz- und Giftpflanzen aller Linder*, p. 930; Baker's *Flora of Mauritius and the Seychelles*, p. 116; Hooker's *Flora of British India*, vol. ii, p. 499, etc.

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#### BOOKS, ETC. RECEIVED.

**The Standard of Value.** By William Leighton Jordan. Fifth edition. London: Longmans, Green and Co. 1888.

**The Science and Art of Surgery.** By John Eric Erichsen. F.R.S., LL.D. Ninth edition, revised and edited by Marcus Beck, M.S., M.B., F.R.C.S. Vols. I and II. London: Longmans, Green and Co.

**The Sectional Anatomy of the Congenital Cecal Hernia.** By E. H. Bennett, M.D., and D. J. Cunningham, M.D. London: H. K. Lewis.

**An Introduction to the Study of the British Pharmacopoeia.** By Rawdon Macnamara. London: H. K. Lewis.

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