

became cold, had shivering fits, then became superficially hot. I saw them at 11.30, when the sister had bluish-red patches of erythema about her face, arms, and chest. Pulse 66, temperature 98.2°. I ordered an emetic of vin. ipecac., to be followed by a mild saline, which relieved effectually the symptoms.

#### THE TREATMENT OF PERTUSSIS.

DR. C. R. ILLINGWORTH writes: Carbolic acid, according to Neale's *Digest*, was used by Bott in 1872, by Cole in 1878, and by Nicholls, Dunlop, and Moritz. It is useful, I think, in every stage, on account of its anæsthetic and antiseptic properties. I find it helpful to divide the disease into two stages: the first being the febrile or spasmodic stage, during which there is no expectoration, but sympathetic febrile disturbance of the bronchial system, or of the meninges of the brain, with general circulatory excitement. The pathological condition at this stage is one of stasis of blood in the laryngeal tissues at the points of lodgment of the micro-organisms of whooping-cough, and sympathetic bronchial congestion in the vicinity. The remedies, therefore, are peripheral vascular stimulants, such as spirits of nitrous ether, acetate of ammonia, and salicylate of soda, with cardiac depressants, such as aconite, ipecacuanha, gelseminum, etc., for the removal of the stasis, and the consequent establishment of secretion, as evidenced by expectoration, ushering in the second stage. As soon as the second stage begins, I give iron, chloral, belladonna, and carbolic acid. The belladonna is most useful when there is much depression and tendency to collapse, as shown by clammy skin, cold extremities, and puffiness of the face, but it is no remedy for the first stage.

When there exists urgent spasm of the glottis in the first stage, and almost incessant cough, I give from one to two grains each of chloral and bromide with the ordinary medicine; and when that has not sufficed, I have found painting the glottis with a thirty-grains-to-the-ounce solution of the nitrate of silver, as advised by Ringer, of the utmost service in securing a good night's rest. When meningeal mischief supervenes in this stage, I find antipyrin of great value, especially when there are convulsions; also the biniodide of mercury in iodide of potassium.

I consider, from experience during the present epidemic, that sulphurous acid is superior to any other agent as an inhalation. I order a small piece of sulphur to be burnt three times a day in the room occupied.

Besides iron, I have used nitric and sulphuric acids, and alum with success in the second stage; but iron (in the form of perchloride) is the best.

MR. EDMUND J. SIMPSON, L.R.C.P.E., etc., Civil Surgeon (Rai Bareilly, Oudh, India) writes: With reference to Mr. Eade's note in the *JOURNAL* of May 11th on the use of carbolic acid in pertussis, I have much pleasure in adding my testimony to his as to its benefits, the disease disappearing in from fourteen to eighteen days. I would refer that gentleman to my paper in the April number of the *Provincial Medical Journal*, 1888, in which the results of three methods of treatment in one epidemic are given.

#### RED MILK.

DR. ROBERT MAIN (East Ilsley, Newbury) writes: I wish to draw the attention of your readers to an uncommon case which has occurred in my practice. Mrs. W., a multipara, aged 30, was recently confined, and two days later drew my attention to the pink colour of her nightdress in the immediate neighbourhood of the mammary glands. She said the milk appeared perfectly natural on excretion, but after drying on her nightdress it became a light pink or magenta colour, and this colour did not appear only on the nightdress, but on any other white substance that was applied. I have satisfied myself that no deception was practised, and have thoroughly watched the proceedings myself.

My patient is taking an ordinary milk and farinaceous diet, and has not had any medicine whatever. I should like to know if these cases are at all common, as this is the first I have seen. I should like also the opinions of your readers in regard to the cause of this phenomenon.

#### SHORTHAND: A CORRECTION.

DR. GOWERS asks us to express his regret that, by a mistake, the words attributed to Professor Greenfield were ascribed to him by an erroneous reading of his letter. How the mistake occurred is mysterious, but such an error would have been altogether impossible (according to Dr. Gowers's experience) with a letter written in phonography.

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#### BOOKS, ETC., RECEIVED.

American Resorts, with Notes upon their Climate. By Bushrod W. James, A.M., M.D., Philadelphia and London: F. A. Davis.  
The Retrospect of Medicine: a Half-yearly Journal. Edited by James Braithwaite, M.D. London: Simpkin, Marshall, and Co. 1889.  
Chemistry—General, Medical, and Pharmaceutical. By John Attfield, F.R.S. Thirteenth Edition. London: Gurney and Jackson. 1889.  
Electricity Theoretically and Practically Considered by the aid of Thermo-Electricity. By Arthur Rust. London: E. and F. N. Spon.  
The Secret of the Lamas: a Tale of Tibet. London: Cassell and Co.  
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