

marked, and differences in method of operating.

"Cases in which pain was increased by the current where those of recent inflammation of the periosteum, or where abscess was present. In regard to the direction of the current of electricity, its force as computed by the sensations of the patient, the position of the poles, and the different forms of electrical apparatus and currents, the committee could arrive at no affirmative results; differences in these respects indicating in the main no specific differences in effect.

"In a final point the committee were unanimous, that in not one instance did any member observe the nearest approach to local anaesthesia. At the same time, the members were of opinion that the intermittent current was allowable in certain cases as a means of producing a diversion of sensation. But as, in a scientific point of view, the electrical current could not be accepted as an anaesthetic, the committee had no data on which to recommend any special electrical apparatus, nor any particular method of applying electricity in dental operations."

It has often been remarked that an individual regarded in a private capacity on the one hand, and as a member of a public body on the other, frequently presents himself under two different aspects. Thus, at the meeting in question, Dr. Purland said, that though he, as one of the committee, had signed the report, his private practice reversed his opinion. He had that morning extracted seven teeth from a lady, and she declared that she felt no pain. We have, however, in this instance, an explanation of the circumstance. The Doctor went on to observe that he must say that he gave no time for her to reply: as soon as he had fixed the battery he placed his foot on the board and asked whether she felt any pain, and—"sharp's the word" with a dentist—before an answer could be returned, the tooth was out!

#### EVIL OF SMOKING TOBACCO AND ITS NATIONAL COST.

A controversy is just now going on in Glasgow between Mr. William Logan and Dr. M. Leod as to the utility or the evil of tobacco-smoking. Mr Logan uses some very forcible argument against the employment of the "weed." He says he had lived

"In London, Leeds, Rochdale, Bradford, and Glasgow, for upwards of sixteen years amongst the humbler classes; and whilst he had met with thousands of inveterate smokers, he never found one of them attempt to defend smoking, but they almost invariably referred to it, of their own accord, as a 'bad habit,' and regretted that they had been foolish enough to learn it. The only occasion on which he had seen tobacco used with apparent advantage was when visiting, some eighteen months ago, the inmates of the Lunatic Asylum at Edinburgh, where the in-

telligent medical superintendent gratified about a dozen of the unfortunate inmates by quietly dividing amongst them about half an ounce of tobacco."

Mr. Logan alleges that tobacco creates thirst—an assertion which is open to objection; and that its use frequently leads to that of intoxicating drinks, which is not necessarily the case. But he hits the mark more closely when he says—

"Much time is lost by smoking. It is supported at a great expense. Many working men spend more upon tobacco alone than would, besides providing them with more comfortable dwelling, enable them to send their children to school, and purchase a newspaper. In an article in the *Scottish Review*, entitled 'Liverpool, its Smoke and Ashes,' it is said—'At the time of our visit to Liverpool, there stood under the sheds no fewer than sixteen thousand large hogsheads of tobacco, and each of these paying on an average a duty of £200, yielding in all a revenue of £3,200,000! and all this ending in smoke, so far as the real comfort and social and intellectual improvement of the people are concerned.'"

#### Foreign Department.

##### CONTAGIOUS NATURE OF THE SECONDARY SYMPTOMS OF SYPHILIS.

M. Auzios Turenne, the originator of syphilization, had, some months ago, induced the Minister of Public Works to ask the Academy of Medicine of Paris the following questions:—

1. Are the secondary symptoms of syphilis contagious?

2. Have the secretions of these symptoms with infants, as far as contagion is concerned, properties different from those they possess with adults?

The Academy appointed a committee, composed of MM. Velpeau, Ricord, Devergie, Depaul, and Gibert, to consider these questions, and give in a report, which has been read by M. Gibert, at the meeting on the 24th ult. It would appear that M. Ricord desired to be excused from joining the committee, so as to be better able to engage upon the discussion of the report. From M. Gibert's exposition, we find that the committee instituted experiments at the St. Louis Hospital, and have come to the conclusion to propose, that the questions asked by the Minister shall be answered in the following manner:—

1. There are secondary, or constitutional symptoms of syphilis which are contagious. The principal of these is the mucous papule, or flat tubercle.

2. This rule holds good for the nurse and suckling as for other individuals; there is no reason for supposing that, with children at the breast, the secretion from secondary symptom