

jail returns an extraordinary number of remittent and continued fevers put down as occurring in the three months at the beginning of the year. This is quite different from the period they are wont to occur among Europeans. If there had been any doubt, this would have been perplexing, but in a note, Dr. Bryden tells us this was the so-called jail fever, or a typhoid bilious fever referred to before, which occurs in the cold season, and which insidiously entered the jails in these years, but in 1867 either died out, or was excluded by careful quarantine.

The new register sheets supplied to the native as well as European troops will greatly aid accuracy, especially if the medical authorities insist on all diseases being entered on them in the hand-writing of medical officers, and if these sheets are extended to jails we shall have an accuracy of record in the case of fevers that Dr. Bryden says we have not at present.

NOTE ON EMBELIA RIBES, AS A REMEDY FOR TAPE-WORM.

By JAMES IRVING, M.D.,
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"BAUBIRUNG" is the vernacular name of the remedy above alluded to, and as it seems to me to surpass many others that I have tried in tape-worm—as, moreover, its virtues do not seem to be extensively known—it has been thought worth while to draw attention to it in this place. In proof of the drug being little known, it may be stated that Dr. Waring does not mention it in his recently-published pharmacopœia of India. Dr. O'Shaughnessy, in the Bengal Dispensary, says that the berries of *Embelia Ribes* are of a pungent, pepper-like taste, that they are used as an adulteration for black pepper, as well as by the native physicians as a vermifuge cathartic. Sir W. Ainslie does not allude to it in his *Materia Indica*, and Dr. Lindley (*Vegetable Kingdom*) merely notes that a slight degree of pungency exists in the berries of *Embelia Ribes* and some others of the same family (*Myrsinaceæ*), while cathartic properties are ascribed to *Erobusta*.

Baubirung is procurable in most Indian bazaars, and, as stated before, somewhat resembles black pepper. The seeds are incased by an outer loose husk, which requires to be removed. This is easily effected by bruising them in a mortar, when the husk readily separates. The kernel, or what remains, is then to be reduced to powder. It need not be finer than ground coffee usually is. The powder is thus given for the cure of tape-worm. The patient should take a slight aperient over night, should not eat supper, and next morning, while still fasting, should swallow an ounce of the powder. In the directions which I received, the powder is ordered to be used with one pint of sour buttermilk, or old "dhye;" and, it is added, "the patient can either take it after mixing the two together, or eat the powder and wash it down by sipping at the buttermilk, which I think the least repulsive form of the two." Both modes seem to be so disgusting that I direct the medicine to be taken suspended in water, syrup, or mucilage, and I find that this answers quite as well. The patient should fast till noon, and then only take a little toast, with tea, or beef tea. He should confine his diet to soup, or beef tea and toast for two or three days. This treatment, with the exception of the purgative, may require to be repeated for three days, and after noon of the third day, a dose of compound powder of jalap is to be given. The first or second dose often destroys the worm, which is expelled in large masses, and dead. It is only, therefore, when this is not the case that the third dose need be administered. Very often, too, the dose of jalap is not required, as the medicine itself is gently aperient in its action.

This mode of treatment has proved effectual in all cases in which I have yet tried it, and I have tried it in some in which kameyla kouso, oil of turpentine, pomegranate root bark, and, I think, also oil of male fern had failed to expel the worm. Baubirung costs in the bazaar of Allahabad about one pice per ounce.

ON THE BITE OF THE SEA-SNAKE.

COMMUNICATED BY F. DAY, Esq., M.D.,
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No snake can destroy a *Tilakchundee Byse*, so we read in Sleeman. Are any Europeans, I would ask, equally safe against the bites of these venomous reptiles as this out-of-the-way caste in Oude? *Mason*, in his *Burmah*, observes at page 311:—"Poisonous water-snakes abound in our estuaries and rivers as far as tide-water ascends. Their bite has proved fatal in every case that has come under my observation, and that, too, in a very short period after the wound was inflicted. The Burmese, however, tell me that persons do sometimes recover, and that bites in the rains usually prove more fatal than in the dry season."

I was lately in Orissa, and much interested in the sea fisheries, and waded out several times to observe upon the captures, and obtain specimens. The native fishermen warned me not to go within the nets attached to the fishing stakes—where I saw the venomous sea-snake, the *Enhydrina Bengaliensi* Gray was exceedingly numerous,—as they asserted that their bite was deadly, and only a short time previously two fishermen, who had been bitten, had succumbed in two hours. The symptoms were said to be numbness of the part, this extending up the extremity which was wounded, œdema of the body, depression of the circulation: death within two hours.

I little thought that I should shortly be subject to a personal experiment as to the venom of these poisonous vermin. Having waded out on January 20th in the afternoon, without shoes or stockings, I saw the usual number of these animals about. Whilst returning towards the shore, I felt my left heel pricked by something, and lifting it up, one of these reptiles was hanging on to the bitten part. I shook him off, and on examining the place I found the places where the fangs had penetrated marked by two drops of blood, distinctly proving that the fangs had pierced the skin.

I had no remedies, was ten miles from any drugs, and the only precautionary measures adopted were pinching the part as strongly as possible, the rubbing the place with brandy, and the internal administration of stimulants. No symptoms were occasioned. I should feel much obliged if any of those who have seen much of the bites of the *Hydrophidæ* would give the results. May not this specimen have discharged its venom on the net, and so had none left for use, or as I began, are there Europeans to whom the bites of these snakes are innocuous?

A SUCCESSFUL CASE OF VENOMOUS SNAKE-BITE.

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As the pathology and treatment of venomous snake-bite are always worthy of attention, the following notes of a case which occurred here may be worth publication:—

On 12th December, a Hindoo fakir, named Oomra, aged 30 years, was admitted into the Rajanpore Dispensary. About twenty minutes before admission he had been bitten on the dorsum of the right foot by a cobra.* On admission, he was

* The patient's description of the snake left no doubt as to its being a cobra.