

be indulged in, and chewing should be condemned for sanitary reasons, because it increases the tendency to expectoration. Co-operate with the medical adviser, make a business of getting well. Do not take too many suggestions from outsiders. The less one knows of a subject the more ready he is to advise. Avoid self-experimentation. Do not discuss your symptoms with other patients. If you do not trust your physician, change him.—*New York Medical Journal*, December 19th.

Bradycardia in Measles.

Burzi (*Gazz. degli Osped.*) relates the case of a healthy well-developed girl, aged 16, who had a severe attack of measles in February last. At the onset of the attack she complained of precordial pain, dyspnea worse on the least exertion, languor and dull pain in the heart. When first seen in February 25th she was very anemic, the heart's apex was a little inside the nipple line and on palpation gave the idea of two beats; there was no thrill or fremitus. On pressure in the third and fourth left intercostal space deep-seated pain was complained of by the patient. There were no murmurs, but the heart sounds were weakened and prolonged. The rate of the pulse varied from 38 to 32 per minute. The blood pressure was diminished. The liver was enlarged and there was some pretibial edema and a trace of albumen. This condition lasted a month unchanged and then slowly improved, and eventually the pulse came back to a rate of 64 to 68 per minute. The edema and slight albuminuria disappeared. During the period of bradycardia the patient also suffered from fainting attacks.—*British Medical Journal*.

Dangers of Stomach Inflation.

Three cases of death following stomach dilatation for diagnostic purposes with CO_2 gas are reported by Behrend. In the first case death resulted from hemorrhage at the base of the ulcer; in the second case the patient was prostrated from its use and never rallied, dying the following day. It was one of carcinoma of the esophagus and stomach with cholelithiasis and pericholecystitis in a very debilitated patient. The third case was in a man suffering from carcinoma of the esophagus and the patient was semi-conscious from the administration of the gas until the time of his death. He thinks that these cases show that the use of carbonic acid gas in inflating the stomach is rather a serious operation, infinitely more dangerous where there is a disease of the esophagus and the cardiac end of the stomach. This may be due to pressure exerted within the narrowed limits. If used, the procedure must be employed only with discretion and in selected cases.—*Medical News*, Dec. 19th.