

The Treatment of Convulsions. C. H. Chapin, M.D.,
Leucocyte.

The child is placed upon a table or upon some one's lap in such a manner that a number of measures can be simultaneously carried out. Some cracked ice is called for, placed in a handkerchief or other thin material, and spread over the occiput and vertex in such a manner as rapidly to cool the brain. If ice is not available, cold compresses wrung out of water at the lowest temperature that can be procured may be employed. The feet and legs are at the same time plunged in a pail containing hot water to which one or two tablespoonfuls of mustard has been added. Caution must here be exercised, as in the confusion the water may be too hot. The writer has obtained practically the same results by the use of this partial bath as by complete submersion, and a simultaneous use of other measures is thus made possible. The bowel is at once washed out, using any available apparatus. In a large number of cases this is followed by the expulsion of undigested masses, and the convulsion ceases. The two drugs which the author has found most serviceable are the bromides and chloral hydrate. Young infants are very tolerant of the drug, and from 3 to 5 grains may be given at once and given every ten minutes, care being taken that the solution is actually swallowed. To be sure of this last point, it is well to depress the tongue with a spoon when the remedy is given so that the fluid may reach the pharyngeal muscles and thus be carried to the stomach. If the convulsions do not cease, the use of chloral hydrate will be found more powerful. From 3 to 5 grains dissolved in half an ounce of water is passed into the rectum, and retained there until absorption. For intractable cases a few whiffs of chloroform may be employed from time to time to check the excessive severity of the convulsion.—*American Medicine.*

Poliomyelitis

H. E. Robertson and A. J. Chesley (*J. A. M. A.*) report six cases with autopsy. From these they conclude: "1. Acute anterior poliomyelitis is a specific infectious disease characterized pathologically by general toxæmia affecting the parenchyma of the heart, liver and kidneys and the lymphoid tissues of the body, but spending itself locally on the structures of the spinal cord. 2. Grossly the cord is congested, and on transverse section shows softening and often hæmorrhages in the grey matter of the