properly filled out.

Patient (male or female)?

Age?

How many previous attacks?

Attacks generally commenced?

Attacks generally ended?

Was asthma present?

Was nose occluded during attack?

Was nose perfectly free before attack?

Has the patient any intercurrent disease?

Does patient use alcoholic beverages?

Does patient smoke excessively?

Do other flowers than ragweed cause attacks?

Did patient's father or mother have hay fever?

Do patient's brothers or sisters suffer from the malady?

-New York Medical Record.

Progress of Medical Science.

MEDICINE AND NEUROLOGY

IN CHARGE OF

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HOT DRINKS IN DYSPEPSIA.

Chronic indigestion in sure, sooner or later, to be followed by disturbance of the motor apparatus of the digestive tract, usually affecting more particularly the stomach, which reacts less readily to stimulation. There results a condition of impaired secretion, plus a greater or less degree of muscular atony, which must be combatted at an early stage if we wish to avoid an incurable degree of gastric dilatation. Among the remedies at our disposal hot drinks have, of late years, attained considerable vogue. The ingestion of tepid fluids exerts a marked sedative action on the gastric mucous membrane and often relieves the painful sensations following meals in chronic dyspepsia. Less recognized, perhaps, is the influence of hot drinks on the motor functions of the stomach. In the ordinary course of events nothing remains in the stomach six hours after a meal, and the presence of alimentary débris after that period indicates the presence of some degree of muscular paresis. This condition of things