

## HINTS TO HORSE-KEEPERS.

## SIMPLE REMEDIES FOR SIMPLE AILMENTS.

There is a class of ailments, which every horse-keeper ought to be prepared to treat himself without assistance. To call in a veterinary surgeon on every occasion of slight illness, would be both an absurd expense and useless waste of time. For instance, costiveness, common cough, bronchitis, or catarrhal disease, strangles, or colt-distemper, worms, difficulty in staling, and some others, are cases which any man who keeps a horse ought to be able to treat successfully himself without any advice, and with ordinary medicines, easily procurable from any druggist. Condition, in its proper sense, is more dependent on proper and systematic feeding, exercising, clothing and lodging, than on medicine; and if a horse be of good sound constitution, and judiciously fed, regularly worked, warmly yet not too warmly clothed, and stabled in a building properly ventilated and aerated; and, above all, if he be kept scrupulously and religiously clean, there will for him be but little need of medicine of any kind. From ill constructed stables arise half the worst diseases, those for instance of the lungs, from want of ventilation; many of those of the eyes, from the excess of ammoniacal vapors and unnatural darkness; many of those of the feet, as cracked heels, thrashes, grease—which in America is known as scratches—from filth and neglect; and most of those of the bowels, and the bowels and lungs combined, from bad food, or good food badly administered. Still, diseases will and do arise from other causes, in the best stables, and among the best-attended horses. And, again, they do arise, and when arising must be dealt with medically, owing to the causes above enumerated.

It may be well in this place to describe briefly the most approved modes of bleeding and administering medicine. The former operation is performed in the jugular vein, the hair is smoothed along the course of the vein with the moistened finger, then, if the fleam be used—which in our opinion, ought to be exploded—with the third and little fingers of the left hand, which holds the fleam, pressure is made upon the vein sufficient to bring it into full view, the fleam is to be placed on the vein, in the direct line of its course, precisely over the centre of it; not exactly touching it, but as near to it as possible without doing so. A smart blow is then given to the back of the fleam with an instrument called the blood-stick, which gives it force sufficient to pierce the skin and open the vessel. A much neater way, however, is to use a broad bladed lancet. The vein is secured and pressed sufficiently to bring it into full view and cause it to swell, with the divided fingers of the left hand, when the point of the lancet is sent in, without an effort, so as to cut slightly upward and to open a clean and sufficient aperture. By this method the danger of cutting the neck foul, without touching the vein, owing to the horse starting at the moment the blow is given upon the fleam, and the yet worse danger of dividing both sides of the vein, are both avoided. When enough blood has been taken, the edges of the wound should be brought smoothly together, and secured by a sharp pin, around which a little tow or a few hairs of the horse should be twisted. The blood, while it is flowing, should be made by a gentle pressure on the vein below the aperture to spring out in a clear, full jet, and to fall into the centre of the vessel used to receive it. If it be allowed to trickle down by the sides of the pail, it will not undergo the changes by which the extent of inflammation may be judged. The operator should accurately know the size of the vessel he uses, so as to calculate the flow of blood.

In giving medicine, if balls be used they should never weigh above an ounce and a half, or above an inch in diameter, and three in length. The horse should be lashed in the stall, the tongue should be drawn gently out with the left hand on the off side of the mouth and fixed there, not by continuing to pull at it, but by pressing the fingers against the side of the lower jaw. The ball is then taken between the tips of the fingers of the right hand, the arm