

All I can say is, that the greatest possible benefit is often to be derived, especially in those still retaining fair stamina, from keeping the supply of nitrogen down below that laid down as necessary for maintenance of health in the ordinary physiological hand-books. This is especially true of those who take little exercise.

With regard to the use of drugs. In the majority of cases I use none, unless, in spite of dietetic treatment and hygienic surroundings, the disease progresses rapidly. I avoid the bromides. The apparent benefit derived from them is more than overbalanced by their disastrous permanent effect on the nervous system.

Iodide of potassium, 10 to 20 grains, at bedtime, is my favorite prescription, even in cases where I do not suspect syphilis.

Belladonna and digitalis I also find in certain cases to be very useful, and free from most of the drawbacks which attach to the bromides.

Stomachics—bismuth, with rhubarb and soda—are often, especially at the onset of the disease, of great service.

Of twenty-three cases belonging to class 1, which I treated on what I may call a vegetarian and milk system, nineteen were markedly benefited. Seven of the nineteen were apparently cured, and eight were able to resume occupations which they had, by reason of the frequency of the fits, been compelled to abandon. The other four of those who derived benefit had a considerable diminution in the number of fits.

Of 118 cases belonging to classes 2, 3 and 4, about half received decided benefit; but, unless I give my full statistics, which, I fear, would be too great a call on your space, I cannot in cases where the causation of the epilepsy varies so widely as it does in such a group, draw any convincing deductions worthy the attention of your readers.—*Journal of Reconstructives*.

TREATMENT OF RHEUMATISM IN THE JEFFERSON COLLEGE HOSPITAL.

Dr. DaCosta treats his cases of acute rheumatic fever, as a rule, with salicylic acid, about a drachm in twenty-four hours; he does this especially in the cases of active, frank character, in which the joint affection is decided. Where marked cardiac complication exists, he greatly prefers the alkaline plan of treatment; indeed, has little faith in the use of salicylic acid either to prevent cardiac complications or to remove them. Nor does he, in any case, continue salicylic acid or the salicylates if no impression is made on the rheumatic malady in three or four days. When the remedy does good at all, his experience is that it does good quickly.

In cases of acute or subacute muscular rheumatism, or in subacute articular rheumatism with much pain and only moderate swelling of the joints, he often employs bromide of ammonium, or, if this fail nitrate of potassium. He uses opium sparingly, and generally confines it to a moderate dose or two of Dover's powder, given at night.

He strongly insists, no matter what plan of treatment be adopted, on the addition of quinine, from twelve to sixteen grains daily, as soon as the more active symptoms have subsided, believing that thereby the patient's strength is sustained and relapse prevented.

Formstincture of chloride of iron he has seen no good, except in pyæmic rheumatism or in kindred forms of rheumatism.

Locally, he uses little, enveloping the swollen joints, if very painful, in a thin layer of cotton-wool; where the joints are very much swollen he envelops them in cloth wrung out in a strong solution of nitrate of potassium, with morphia added.

The diet is always blank and unstimulating, chiefly milk, farinaceous substances, and very moderate amounts of broths, eggs, and fish. Alcohol is not given, except in the so-called "typhoid cases," in which also high temperature is generally found.

—*Med. News*.

PHILADELPHIA CLINICAL SOCIETY.

STATED MEETING, FEBRUARY 25, 1887.

The President, Dr. JAMES B. WALKER, in the chair.

The President introduced the subject of

ARTIFICIAL FEEDING OF INFANTS.

The importance of the subject all will admit, and depends upon (1) the inability of the mother to afford nourishment; (2) the demands of the child for the materials for growth, repair, and heat-production; and for *protection* from indigestion and the numerous disorders of malnutrition. The prominent indications of the non-agreement of any food are excessive colic, vomiting, diarrhoea. The results are seen in losses of flesh, strength, vivacity, and color, non-development of general body or of parts, as of teeth, retardation of infantile accomplishments, psychical or physical, or even loss of those which have existed. One or many of these conditions may exist and call for attention on the part of the physician to the imperative needs of the little patient.

In choosing a diet there is no established law, save that the food shall be easily digested, non-irritating, and suitable for nourishment and heat-production. If the infant have been nursing its mother, the *quantity* may be alone at fault. In all such cases artificial food should be made to *supplement* and *not* to *substitute* the natural supply. The amount of artificial food must vary with each case from every alternate feeding to two or three feedings daily. Should the *quality* of the mother's milk be at fault, or should she be unable to nurse her child from other causes, a complete *substitute* must be furnished.

Here, unquestionably, the best, because furnishing the most rational substitute, is the wet-nurse. But, rational though it be, it has objections which sometimes are insurmountable. Among these are the expense incurred, the difficulty of getting one whose milk is altogether satisfactory, or, this