

103°F., with dry chest notes; we order him straight to bed in a temperature of 65° to 70°F., covered with blankets, and straightway inject  $\frac{1}{4}$  grain of nitrate of pilocarpine subcutaneously, encouraging the subsequent sweating with diaphoretics and warm drinks, to be mentioned later on; the mixture we prescribe is liq. ammoniæ acet. 3j., sp. eth. nit. 3ss., sweetened camphor water 3j., and with each dose two minims of Fleming's tincture of aconite, to be taken every hour for the first three or four doses, subsequently every two hours, finishing up next day with two grain doses of quiniæ sulph. By this means, in the majority of cases, we avoid having to pay many visits and save his club many weeks of sick pay. In this case we do not reach the second or moist stage of the disease, the first being what we describe as the hot, dry stage. But we do not always get at our cases in such an early stage, usually the first has passed off and the second stage is commencing. We still inject the pilocarpine and order the above mixture, but supplement the treatment now with steam from the bronchitis kettle, to which we add twenty minims of the ol. menthæ pip. for each pint of water in the kettle. This steaming should be continued for twenty or thirty minutes every two hours, or perhaps continuously for the first six hours, should the case be severe. With children in the same condition we use bicarbonate of soda in the proportion of 3iv. to the kettle of water, poultices of linseed to the back and chest and a mixture proportionate to age, and for our little sufferers we manage to make a very nice bell tent with the mother's umbrella. When the acute symptoms have passed off we rub the chest and back with a liniment composed of ol. camph. (essential) 3j., tinct. opii. 3iss., lin saponis 3iss., to be well rubbed in with the hand two or three times a day. Now the rationale of this treatment consists in causing the removal of carbon from the blood by the skin instead of the lungs, by inducing sweating, and it is wonderful how such minute doses of the tincture of aconite helps us to accomplish this. With children we also have the back and chest well swathed in wadding after the poulticing, but for adults this is not necessary. For these we are also convinced that no inhalant gives such a soothing affect as the oil of peppermint, but children do not bear it at all well. With adults also we find that if a stimulant is required we cannot find anything better than one-sixteenth of a grain of the hydrochlorate of cocaine in a pill freshly prepared, repeated in two hours if necessary. In no stage of the disease do we consider alcohol necessary, in fact we look upon it as harmful. After the temperature has come down to nearly normal we reduce the temperature of our patient's room to 60°F., gradually getting it to 55°F., and there we endeavour to keep it as long as necessary. The tonic we have found most

benefit from is quinine with, in some cases, three minim doses of Fowler's solution. In poulticing children we have found it of benefit to cover the poultices with a piece of "Christia," a substitute for oiled silk of which we cannot speak too highly.

For drinks to promote perspiration we have found whey made after recipes published by Dr. J. J. Ridge, in a little book which he calls, "Diet for the Sick," and which can be procured from Messrs. Churchill, and for children "Cream Whey" will be found most useful. Saline aperients, should anything of the sort be needed, are indicated, and for children nothing is better than phosphate of soda, which may be given dissolved in beef tea. To sum up the points in treatment we lay most stress upon are the subcutaneous injection of pilocarpine when the patient is comfortably recumbent in a temperature of 65° to 70°F.; the exhibition hourly of tinct. aconite (Fleming's) until temperature is lowered; the keeping up of sweating until the breathing is easier, and the exhibition of hydrochlorate of cocaine if a stimulant is required.

Formerly the family doctor prescribed almost invariably tartrate of antimony in acute pulmonary inflammation, and other remedies which would horrify the modern medico, and yet we almost think that even though we had not heard of the bacterium termo or the other strange animals which Professor Koch and his merry men are annihilating in billions (by their own account), disease was as quickly and satisfactorily dealt with as in these times, when the march of intellect demands the placing of the "Gamp" on a level with the heads of the profession; and there are many good men and true, who have the best interests of the profession at heart, who would strongly advise a return to the days when materia medica was learned while pounding up two or three pounds of pil. rhei. co., or mixing up the stock of mist. alb. This, however, has nothing to do with curing bronchitis, so to return to the subject and by way of concluding we would call attention to an old-fashioned remedy which is useful in most chest cases, and that is *Lichen Islandicus*, otherwise Iceland Moss, prepared with milk as recommended by Dr. Ridge, or made into a jelly known in Ireland as "Carrageon Jelly." We hope that we have not wearied our readers and at the same time that we have given some useful hints on treating acute bronchitis. At some future time we may say something about the chronic form which so often remains as a sequel of the acute, and which is so difficult to treat satisfactorily.—*Hosp. Gaz.*

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HEADACHE almost always yields to the simultaneous application of hot water to the feet and back of the neck.