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jects, as, for example, the wife of a man who suffers from tabes. The treatment in these cases ought to be thorough, and the author makes a point of submitting all cases of tabes in his practice to mercurial treatment. It has been noted of late years that the general aspect of tabes dorsates has been less grave than formerly, and this is to be attributed in large measure to early antisyphilitis treatment.

ABDOMINAL PTOSIS.

H. A. Oldenborg, Chicago (Journal A. M. A., March 1), briefly calls attention to contributions on the subject of abdominal ptosis and says that, while most writers have recommended gymnastic exercises, few have given directions as to how they should be performed. A11 agree that the adbominal walls are relaxed and that there is more or less pronounced lumbar lordosis, round shoulders, flat-chestedness and acuteness of the so-called epigastric angle attending ptosis of the abdominal organs. To correct these conditions it would consequently be necessary to strengthen the upper spine, develop the chest and increase lordosis. He asks if there is enough attention paid to predisposed children and to those that have inherited the weakness. Another class would be women whose abdominal walls have become relaxed from frequent pregnancies and those of both sexes who have acquired the condition on account of accident or nature of their occupation. With children, good hygiene, plenty of outdoor air and regulated gymnastics during their school years would do much to lessen, or perhaps remove. the liability from inheritance or perdisposition. After the physical development is complete the same means can be used, but the patients have less time and perseverance, and with these, according to his experience, we have the least success. His description in detail of the routine methods at the Central Free Dispensary in Chicago for the treatment of those who have acquired the condition cannot be well condensed. They can be used as after-treatment of surgical intervention and long confinement to bed and have the advantage that they can be employed and produce their beneficial effects before the vicissitudes of the erect position are encountered. He lays special stress on the point that the patients should not be allowed to hold their breath. The illustrations in the article usefully supplement the description of these special methods.

The Ontario Medical Association this year should be well patronized by the profession.

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