THE HEART UNDER ROENTGEN ILLUMINATION.

Dr. Benedict, of Vienna, (Wiener Medizinische Blatter, October 29, 1876), finds by X-ray illumniation that the apex approaches the base of the heart in systole, so that there is no apex impulse in Skoda's sense, but at most a lateral systolic apical stroke. The ventricles are not entirely emptied at each systole, but always retain a considerable amount of blood; nevertheless, the four thousand heart-beats to the hour carry fresh blood enough into the arteries. On deep inspiration, the normal heart rises from the diaphragm, so that an appreciable interval is visible between them. Such examinations are most satisfactory if made on young and thin persons, and they do no harm unless they are made improperly or too often.

TOBACCO AND THE EYESIGHT.

Prof. Craddock says that tobacco has a bad effect upon the sight, and a distinct disease of the eye is attributed to its immoderate use. Many cases in which complete loss of sight has occurred, and which were formerly regarded as hopeless, are now known to be curable by making the patient abstain from tobacco. These patients almost invariably at first have color blindness, taking red to be brown or black, and green to be light blue or orange. In nearly every case, the pupils are much contracted, in some cases to such an extent that the patient is unable to move about without assistance. One such man admitted that he had usually smoked from twenty to thirty cigars a day. He consented to give up smoking altogether, and his sight was fully restored in three and a half months. been found that chewing is much worse than smoking in its effects upon the eyesight, probably for the simple reason that more of the poison is thereby absorbed. The condition found in the eye in the early stages is that of extreme congestion only; but this, unless remedied at once, leads to gradually increasing disease of the optic nerve, and then, of course, blindness is absolute and beyond remedy. It is, therefore, evident that, to be of any value, the treatment of disease of the eye due to excessive smoking must be immediate, or it will probably be useless.

PROMISCUOUS USE OF HAND-'KERCHIEFS.

At a recent meeting of the Dublin Sanitary Associations, the president, Dr. J. W. Moore remarked upon the spread of coryza by the common use of pockethandkerchiefs. One of the commonest maladies is "cold in the head," or, as it is technically called, "caryza." It is notoriously infectious, and the means of communication is the discharge from the nostrils. He was satisfied from repeated observation that this troublesome affection often spreads through a family of children and then through an entire household through the promiscuous use of pocket-handkerchiefs.

A little child comes to the nurse with the request, "Blow my nose." This is carelessly or thoughtlessly done with the parent's or attendant's pocket-handkerchief, which has become infected and spreads the attack. In other cases the soiled pocket-handkerchief is allowed to dry without disinfection, and the dried discharge from the diseased mucous membrane of the nose is then diffused through the air, spreading the malady just as measles is spread.

The recommended time of quarantine adopted by the Pennsyivania State Board of Health for persons who have been exposed to infectious diseases, when they may safely be admitted again to school, if they continue in good health, and have taken proper measures for disinfection, are as follows: For diphtheria, after twelve days; small-pox, eighteen; measles, eighteen; chickenpox, eighteen; mumps, twenty-four; whooping cough, twenty-one. Adults may be admitted at once, if they disinfect their clothes and persons.—Maryland Medical Journal.