

Those who live in certain of the cities and towns in Ontario have good reason to believe that our municipal authorities do not appreciate the dangers to which citizens are exposed from floating dust. Take, for instance, Beverley Street, in Toronto, with its expensive and admirable macadam pavement (so far as macadam pavements go). It sometimes happens when our street-watering machinery is out of joint that this street is exceedingly dusty. Apart from the great discomfort which is produced by the inhalation of dust, there are probably other dangers in connection therewith that we know not of. After all, we must agree with the *Lancet*—mud is infinitely better than dust; even mud on one's shirt-collar is preferable to dust in our nostrils and other portions of our breathing apparatus. The *Lancet* is right when it says that paradoxical as it may sound, mud is clean, at least as compared with dust. We might perhaps, without offending the sensibilities of our city fathers, throw out a gentle hint that clouds of dust on a cold and windy day are no less noxious than those we meet in warmer weather, and consequently the watering cart is as much a necessity in the cold spring months as it is in the dog days of July and August.

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### APPENDICITIS.

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We take the following thoughts from Mr. Southam's article in a recent number of the *Medical Chronicle*:

It would be safe to say that the appendix has attracted more attention during the past ten years than any other portion of the body. Twenty years ago works on medicine and surgery contained nothing about the diseases of the appendix, and clinical teachers were dumb regarding those cases of inflammation now ranged under the heading of appendicitis. It is true that typhlitis and cecitis got an occasional word of attention.

"Contrast the above state of knowledge with that pertaining at the present day. Many a death certificate was given with the word, 'Peritonitis,' written therein, whereas it should have been 'Appendicitis.' With truer knowledge came truer methods of treatment. How very different the management of a case of appendicitis to-day, from the management of a case of pain in the left iliac fossa, going on to general peritonitis of twenty years ago.

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