

given; for drink, sweet wine or cold water. . . . Besides these, rest, serenity, silence, are necessary. Also the head of him lying down ought to be high. . . . The face is to be bathed frequently with warm water. But wine, the bath, venery, oil in food, all condiments, warm fomentations, a hot and close room, many clothes thrown on the body, also frictions are injurious. When the blood has ceased considerably, then must we begin (with frictions) the arms and legs; we must keep from the chest."

We should adopt those measures which will ensure a maximum of mental and physical rest and quietness, our object being to secure a lowered blood pressure and steady, even circulation.

In the majority of instances measures of any kind seem of little avail. The bleeding ceases spontaneously, irrespective of measures employed. There are few conditions where the action of drugs is so uncertain.

The line of treatment will be necessarily somewhat different when dealing with an aneurysm, from that used if the condition is purely congestive. A differential diagnosis can rarely be made.

The patient must be placed at absolute rest in the semi-recumbent position. If clothed, it is better to make no attempt to undress for an hour or two after the brisk bleeding has ceased, and then he must not exert himself, but allow all to be done by his nurse. If there is excitement a cold cloth to the forehead is grateful. Cracked ice may be given to allay cough. The room must be quiet, and those about the patient must also be quiet, doing all possible to give him confidence. He must not be burdened with heavy clothing, light clothing is sufficient. As little effort as possible is to be used in clearing the blood from the throat, while the cloths or receptacle used to collect the expectorated matter are to be handled by the attendant, the patient endeavoring to make no muscular effort. The arms in particular are to be kept quiet. In severe cases this regime of quietness is to be observed for full four days after the cessation of fresh bleeding, and moderate quietness for four full days after all clots have disappeared. During the term of absolute quiet, no visitors are to be admitted, particularly anxious, weeping or nervous relatives. At times even mother or wife must be excluded; the patient must not attempt to hold a book or newspaper, brush his hair, leave the bed for any purpose, nor even change his position. A cramped arm or leg may be moved by the nurse. As mental excitement increases blood pressure, any excitement through fright should be allayed by nurse or physician. As death so rarely occurs in hæmoptysis, the physician is justified in assuring the patient he need not be alarmed, and his own actions during the attack will have much effect on the patient.