

the chapel to be baptized. She was completely immersed in the baptistry, which was filled with rain water at a temperature of about 40° F., the ceremony not lasting above a minute. After this she walked back into the vestry, but immediately became unconscious, and, notwithstanding all possible efforts being made to resuscitate her, succumbed. The post-mortem examination revealed that there was cardiac disease. As, however, there was no doubt that the immersion was the determining cause of death, the unfortunate minister who performed the ceremony was at first sentenced to a week's imprisonment. This was, however, ultimately remitted. The neighboring Baptist congregations have, it is said, taken warning by the case, and have arranged to have the water for immersion always warmed in future, as is, we believe, the custom in this country. Another suggestion naturally arises from such an occurrence as the above—namely, that persons suspected of heart disease should have the benefit of a medical examination before being submitted to the rite of immersion.—*LANCET*.

A DRUG TREATMENT OF PNEUMONIA.—In a lecture on "Acute Lobar Pneumonia," by Dr. A. K. Hill (*N. Y. Med. Times*), the writer states that the disease is infectious and self-limited. He then goes to mention twenty-three different drugs as being of use in the disease. The list is an interesting one: Aconite, veratrum, arnica, gelsemium, belladonna, hyoscyamus, chelidonium, digitalis, iodine, opium, phosphorus, rhus tox. sanguinaria, tartar emetic, sulphur, arsenicum, charcoal, phenacetine, liq. ammon. acetat. A good word is said for all of these in accordance with the indications, but perhaps the most surprising endorsement is that of vegetable charcoal, which we are told will "almost snatch a patient from the pangs of death when there is profuse cool sweat, small and rapid pulse, great prostration, dry tongue, offensive excretions," etc.

Suitable and sensible remarks are made regarding the use of nourishment and stimulants, but the large emphasis laid upon drugs is surprising. We recall to our readers an article by Dr. Fenwick reviewing the results of treatment of one thousand cases of pneumonia at the London Hospital. The conclusions he drew was that the best results were obtained by the use of ice and the ice-cradle, sponging and packs, with proper nourishment and stimulants. Instead of mentioning twenty-three drugs, he mentioned four, and spoke ill of each of them.—*Med. Rec.*

[We are with Dr. Fenwick.—Ed.]

BATHS FOR ELDERLY PERSONS.—Dr. Emerson states in the *Annals of Hygiene* that the use of baths in elderly persons restores elasticity and

smoothness to the skin; loosens the tissues and thereby brings back fullness and rounds to the limbs. It prevents eruptions of the skin and where present it removes them often, even from the face. It prevents the body giving off too much heat, which enhances nutrition. He gives the following rules for bathing:

It is well to commence with these baths as soon as the first infirmities of age begin to make themselves felt, between the fiftieth and sixtieth year. Two or three baths should be taken every week. As the water cools off, hot water must be added and the thermometer consulted.

The best time for bathing is the forenoon, about two hours after breakfast, or the afternoon, about four hours after midday meal.

After the bath the body must be well dried and rubbed with coarse towels.

Baths either too hot or too cold are dangerous to old people.—*Dietetic Gazette*.

WHEN TO DISCONTINUE MECHANICAL TREATMENT IN HIP-JOINT DISEASE.—At a meeting of the Section on Orthopaedic Surgery of the New York Academy of Medicine, Dr. Newton M. Shaffer called attention to the difficulty which often existed in deciding when to discontinue mechanical treatment in hip-joint disease. The following conditions contra-indicated the removal of the apparatus: If manual concussion produces pain or flinching; if there is considerable deformity without ankylosis; if there is a true joint-limp or if there are abscesses or sinuses connected with the joint; or if there is a true reflex muscular spasm, limiting movement slightly in all directions; if there is almost perfect flexion, with the other movements considerably or markedly limited; if flexion, abduction and adduction are excellent, with rotation and extension limited; and, finally, if all the movements are almost normal, except rotation inward during flexion (the limitations being due to the neuro-muscular protection).—*Med. News*.

IODIDE OF POTASSIUM IN THE TREATMENT OF URTICARIA.—Stern has successfully treated five cases of chronic urticaria by the administration of iodide of potassium, four of the cases having been rebellious to all the measures usually employed in this disease. The fifth case was one of acute urticaria of a few days' duration. None of the patients were syphilitic and all were rapidly cured. In one case which had lasted for four months the intolerable itching disappeared on the second day of treatment, and a complete cure was obtained after two and a half drachms of the iodide had been administered. In two other cases, one of two years' and the other of six years' duration, the effect of the iodide was equally good, cure following the administration of six and eight drachms respectively.—*London Med. Recorder*.