these wounds, it was necessarily in a very imperfect manner—in the open air, within the zareba, amidst clouds of dust, dirt, and animal excretions of all sorts—yet we see the results.

The men were in the most perfect health at the time their wounds were received, having lived in the open air for several weeks before, with plenty of exercise, a simple diet, without stronger stimulant than tea. Looking back over the whole campaign, that which impresses me most is its wonderful healthfulness and extremely low mortality. I doubt not that it would have been as great if the same men had followed their usual occupations at home. And when the reasons for such wonderful salubrity are sought, the greatest factor without doubt will be found to be—not only in the clear, bright, dry atmosphere of the Great Lone Land, which has never been too highly spoken of—but to the fact that we were constantly in it by day and by night, breathing without stint its health-giving properties. From my experience of open-air life and that of dwellings generally and sick rooms in particular, the hygienic importance of pure free air and light do not, I feel, receive their full value—either from the profession or the public—notwithstanding all that has been written and spoken about them.

NOTES OF A CASE OF DUODENAL PERFORATION.

BY M. DAVISON, M.D., FLORENCE, ONT.

Albert K——, æt. 40, farmer, unmarried, of regular and temperate habits, had for years complained of what was termed dyspepsia, and consulted my physicians without permanent benefit. At times he would be free from stomach troubles, again without any known cause his disease would return. Was nearly always able to work, but suffered frequently from pain in the stomach, from three to five hours after meals. He was then obliged to eat something, which generally relieved the distress.

About 6 p.m. December 5th, 1885, was suddenly and violently attacked with intense pain about the region of the stomach. I saw him within half an hour, and found him unable to sit or stand still, and groaning loudly from the intensity of the pain, which now radiated without intermission in every direction from the stomach. Pulse and temperature normal; no tenderness; pressure well borne; no vomiting. Applied hot fomentations, sinapisms, turpentine, etc., and administered one-quarter grain of morphia every fifteen minutes for two hours, without relief. Continued the morphia in less frequent doses, and gave chloroform by inhalation during the remainder of the night. Suspected perforating ulcer of stomach. December 6th, pain less violent; pulse and temperature normal; tongue slightly coated; no appetite; continued morphia and fomentations. About 7 p.m. had a chill, followed by all the symptoms of extensive peritonitis, pain more general, and very intense. Again administered chloroform, and added Tr. aconite rad. in ♏ ii. doses. Confined patient to liquid nourishment.

Dec. 7th.—Pulse 120; temperature 103°. All the symptoms of acute general peritonitis. Gave morphia in large and frequent doses. Dr. Duncan of Thamesville called in consultation, who concurred in diagnosis of perforation, and in treatment, which was continued.

Dec. 8th.—Pulse irregular and rapid; temperature 100°; delirium; cold perspiration; extreme prostration; condition of partial collapse; stimulants by skin and stomach *ad lib.*

Dec. 9th.—Collapse not quite so great; pulse weak, irregular and fluttering; faintness, perspiration, temperature 100°. Gave morphia, and Tr. digitalis, with milk and whiskey *ad lib.*

Dec. 10.—Slight improvement in heart's action; tympanitis abating; pain not so severe; took more liquid nourishment, with stimulants; slight jaundice beginning to appear in conjunctiva and skin.

Dec. 12th.—Gradual improvement in all the symptoms; tympanitis nearly gone; some fluctuation from serum; bowels moved for the first time since attack. First motions feculent, followed by very large quantities of dark blood of tarry consistence and color.

Dec. 15th.—Still slowly improving; dark blood continued passing frequently till to-day, when fresh blood appeared in moderate quantity; troubled with hiccough; appetite improving; dietary confined as far as possible to liquids, although some solid food was given by the friends at times. Continued morphia and digitalis, in less frequent doses; kidneys acting well; urine healthy; moderate fluctuation.