fever. The degree of febrile heat that in one infant may have no deleterious effect, in another may cause most alarming symptoms. It will consequently follow that in one case we may feel it to be our duty to institute energetic modes of treatment designed to reduce temperature, whereas, in another case, we can safely desist from any active treatment.

Upon the subject of treatment I have nothing new to suggest. On the contrary, I wish to urge the application of old remedies, and to sound a note of warning against the indiscriminate use of drugs in the treatment of fever in infants. The increasing experience of each succeeding year more and more convinces me of the efficacy of water in the treatment of fever. The technique of hydrotherapy will vary somewhat from that in the adult. Greater care must taken not to induce shock or excite fear. An efficacious mode of applying water in the treatment of fever in infants is by intestinal irrigation. In carrying out this treatment, it is better for the mother or nurse to place the infant upon her lap, as its movements can be more readily controlled. rubber cloth, covered by a sheet, is spread across the lap; the end, reaching to the floor, can be placed in a wash bowl or other receptacle; a soft rubber catheter is attached to the nozzle of the fountain syringe, which should be hung about four feet above the child. One or two pints of warm water may be poured into the receptacle, and the catheter inserted into the bowels. As the water flows, cold water is gradually to be added. I think this prevents any undue shock to the child, and I am certain it lessens the resistance of the child to the application of the treatment. The practical point is to retain from half a pint to a pint of the cold water. in the bowel long enough for the water to absorb the body heat. In order to accomplish this, it will necessary to exert firm pressure upon either side of the buttocks. It is just here that this method of treatment so often fails to reduce temperature, for the water is expelled from the bowel before there has been time to extract the heat. Again a considerable quantity of water is required. I should say from one to two gallons. With care, this mode of treatment is not painful to the patient, and is very certain in its results. For instance, I saw a child ten days old, on the night of May 29, 1900. Its temperature, per rectum, was 1061/2. It had had one convulsion before my arrival and had another after I saw it, before I had time to begin any treatment. In that case I used about 6 quarts of water, beginning with the water at the body temperature. Within an hour after the commencement of treatment, the child was resting quietly, free from nervous symptoms, with a temperature of 100.