

ment, I find there are some practitioners who regard the proceeding as utterly valueless, and others who condemn it altogether. With those who ignore its claims to general acceptance, I think Sir Wm. Jenaer may be classed, as his latest published clinical lecture makes no mention of it whatever.³ Of the extremists who deny its utility, but regard its use with apprehensions almost hydrophobic, Dr. Sweeting, of Stratford, England, may be accepted as the leader, though his following, I think, must be a somewhat slender one, for, a glance at the leading medical publications of the past two years renders patent the fact, that almost every writer on the subject, has not only adopted the practice but expressed the greatest satisfaction at the result. From some of the more prominent of these contributors to current medical literature, (within the period specified,) I may, very briefly, quote conclusions. Dr. C. H. F. Routh⁴ states that in all cases exhibiting a tendency to death from the violence of the fever, "cold affusions to the skin," or "cold spongings" are indicated. Dr. Walter Fergus recommends⁵ "rapid sponging with vinegar and water" if the patient does not sleep—or there is much irritation of the skin. In cases with extreme development of the rash, and burning skin, "the cold douche, rapidly given," he says, "acts like a charm." The patient, placed in a sponging bath close to the bed, has four to five wash hand basins of cold water poured in quick succession over him, is "quickly rubbed dry," and put to bed, when, "if the treatment has done good, he drops off to sleep at once." I scarcely think the *rubbing* process likely to be well-borne. In all the cases which have come under my observation the gentler the manipulations the better. Dr. Charles T. Thompson⁶ on the very first access of the fever puts his patient into a warm bath, and repeats it as his strength will allow, or the severity of the attack may require. He speaks of the effect as soothing and refreshing, and states the proceeding is almost uniformly followed by an eruption "so vivid in color, and of such an amount, as would astonish

3. Clinical Lecture on Scarlet Fever, delivered at University College Hospital, 30th Oct., 1869.

4. *London Medical Mirror*, 1st April, 1870; and Report of Medical Society of London, 3rd January, 1870.

5. "On scarlatina," (*London Lancet*, vol. 2, 1869, page 703,) by Walter Fergus, M.D., Edin., &c.

6. "On the Treatment of 'scarlatina,'" (*London Lancet*, vol. 1, 1869, page 291,) by Charles T. Thompson, M.D., M.R.C.P.