and Surgeon to St. John's Hospital, where a thoracic wound thirteen and a half inches in length, penetrating the lung cavity was the feature, antikamnia tablets were used for the relief of pain, and it is now becoming quite a proposition with the profession as to whether morphia is not to be driven almost entirely from the field, in the broad general sens. which has so long marked its use.

GASTRO-INTESTINAL AILMENTS OF YOUNG CHILDREN.

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As the hot weather approaches the usual number of cases of gastrointestinal ailments will confront us, and if we be not alert the same mortality of old will occur among our little patients of one and two years. The keynote to success in the management of these cases is to see that correct feeding is enforced and to keep the alimentary canal as clean and nearly aseptic as is possible. If this be done much suffering can be obviated and many little lives saved.

Every medican man these days is capable of giving correct advice on infant feeding, the care of bottles, accessories, etc., if he will only take the time and trouble to make the mother understand how important it all is. The doctor's suggestions on this matter are too often regarded as simply platitudes and not thought of seriously until the child is in the throes of a severe illness. The following clinical reports are illustrations of my usual method of handling the more common but serious gastro-intestinal diseases we meet during the heated season.

Ethel G., aged ten months, suffering from cholera infantum; bottle fed. Was passing watery stools every few minutes. Temperature had been considerably elevated, but was now slightly abnormal. Mouth and tongue parched. Considerable emaciation and scaphoid abdomen. Circulation weak and respirations labored. In fact an extreme prostrate condition. Treatment: I put four ounces of Glyco-Thymoline with eight ounces of water and gave it as a high enema, causing it to be retained as long as possible. This was repeated every hour or so until the bowels were thoroughly cleansed and the stools diminishing in number. Gave one-tenth grain of calomel every two hours until the discharges showed the characteristic greenish color. Also gave the following:

B Elixir Lactopeptine 3 ij Glyco-Thymoline 3 ij Oil Peppermint gtt. j

M. Sig.—20 drops every hour. After eight hours the child was able to take nourishment and retain it. This consisted of cold pasteurized milk diluted with an equal portion of lime water. Child was given