

acquainted with broncho-pneumonia well know the highly marked remittent or almost intermittent character of these affections. Ice-bags have the objection that they often give rise to a little wetting of the child; but this has not, in his experience, proved injurious to the patient. Leiter's tubes have been tried, and have some advantages, being especially valuable when an intelligent nurse is in attendance. In severe cases, in which a rapid effect is required, two ice-bags have been placed on the head and one over the chief seat of consolidation in the lungs. With a little management, he says, it is not difficult to keep these in place; certainly not when the neuro-muscular prostration is marked, as it almost always is in severe cases. The chief merits of this treatment, he says, consist in the maintenance of the strength, not only of the heart, but also of the respiratory centres and of the nervous and muscular systems. Although otitis media occasionally occurred, yet this has not been more frequent than in cases treated without cold. Albuminuria, he says, is not rendered worse by the cold, nor have any cases of hæmaturia been observed, although Dr. Money has been at some trouble specially to collect and test the urine. The duration of the disease he declares to be, on the whole, shortened. Convalescence is almost invariably rendered more rapid, doubtless because of the conservation of the child's energy.

Not only, he says, does the cold directly quiet the heart and steady the circulation; but the calming of the nervous system also acts indirectly in the same direction. The respiratory centres are similarly beneficially affected. The heat-regulating apparatus manifests more clearly the same beneficent action, and the temperature-chart shows a similar harmonious effect. It is curious to observe the almost immediate cooling of the whole surface of the body soon after the application of ice to any part, this cooling effect being perhaps best marked when the ice is applied to the head; the hands, previously red and hot, become cool and slightly blue. The change is decidedly favorable, notwithstanding the supervention of the signs of feeble circulation in the exposed parts of the skin. Vomiting diarrhoea, alone or in combination, may require treatment in the cases under consideration; the cold method, he says, does not increase diarrhoea, but certainly tends to stave off vomiting. Stimulants are to be used when indicated, but they are less apt to be necessary under this treatment. There is, he says, a saving of expense all around; the cost of the illness is lessened and there is less expenditure of reserve strength.

NARCOLEPSY—BRIEF REPORT OF A CASE IN PRACTICE.

By H. D. Dowsley, M.D., Kingston.

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by trade, aged about twenty-eight years, a powerful, well-built man, apparently in good health, was subject to short attacks of deep sleep, lasting a few minutes, from which he would awake refreshed as from a natural sleep. The attacks of sleep would occur at any time, regardless of the hour of the day, or degree of temperature. On one occasion when driving to town in the morning, about 9 o'clock, of a winter day, sitting upright in a sleigh with a companion by his side, and driving through pitches, he fell into a sound sleep, still retaining his position, upright in the seat. He slept for a few minutes, and woke apparently quite refreshed.

There were no symptoms of premonition; no symptoms of a convulsive nature, either preceded or followed the attacks, which occurred at intervals of a few weeks, and sometimes more frequently. The family history, as far as known, was good. This affection, which appears to be a neurosis, has received the name of narcolepsy, and Legrand appears to look upon it as a true neurosis. The patient was treated with arsenic and iron. He thought he had made some improvement, from the fact that the sleeping attacks did not occur so frequently, otherwise there was no change, the attacks being the same when they did occur. Speaking from memory, the attacks in this case have occurred during the past fifteen or sixteen years, with the frequency stated. If, as Legrand supposes, this is a true neurosis, the improvement, if any, was probably due to the arsenic.—*Épilogue*.

SURGERY OF THE BRAIN—BASED ON THE PRINCIPLES OF CEREBRAL LOCALIZATION.

By ROSWELL PARK, A. M., M. D., Professor of Surgery, Medical Department, University of Buffalo.

In brief, of White's one hundred tumors only nine could have been removed—namely, one tuberculous nodule, four sarcomas, two undetermined tumors, one cyst, and one myxoma. In other words, 9 per cent. could have been attacked *providing* a fairly accurate diagnosis had been made. *Ante-mortem* diagnosis, however, and anatomical diagnosis are two very different feasts. Of the above-mentioned nine, five were located in the cerebellum, one in the frontal lobe, and one in the extremity of the occipital. It is very doubtful if these seven could have been recognized accurately enough during life to have justified attack, while the myxoma was impossible of diagnosis. We are then narrowed down to one tumor out of the hundred which was susceptible of both exact localization and extirpation, even when looked at in the light of the acquisitions of to-day. This is not a very favorable showing, to be sure, and is to be accepted only for what it is worth. If it has any very striking bearing I should regard it as