

tion with flexion or version; and (1) hardness and rigidity of the os and cervix, the first being much the more important of the two. The second factor is likely to be removed, and with it the vomiting, by Dr. Copeman's plan of dilating the internal os; while the first is obviated by raising the uterus from its displaced position, and if this can be done, the vomiting almost invariably ceases.

In the last resort we must relieve the condition by the induction of premature labor, which should be done before the strength of the patient is reduced to too low an ebb.

Of the treatment of that hydra-headed monster, dyspepsia, time will only permit of my giving one or two illustrations. Let us take the case of a full-blooded man of sedentary habits, who indulges in the pleasures of the table, and whose bowels are habitually constive. He has bad teeth or eats his food very quickly; he dines in town, making for the nearest restaurant and snatching a hasty meal of very miscellaneous and often badly cooked food. He has frequently headaches, or a feeling of "swimming in the head," which may be the immediate cause of his seeking advice. We find that his tongue is habitually coated, that his appetite is defective, that he has a craving for food, and after a meal he has "a load at his stomach," or complains of a feeling of distension, from which he finds relief by loosening his clothing. At times, too, he may suffer from uneasiness in the hepatic region or in the shoulder, and his liver may even be slightly tender on pressure.

I have taken as an illustration a typical case such as we often meet with in business circles, and which cannot readily be mistaken, but minor forms of the same condition are very apt to be overlooked, especially if our advice is sought for some ailment indirectly produced or aggravated by the dyspepsia, such as asthma or eczema, or gravel.

In such cases the bowels must be carefully regulated, and occasional doses of antibilious medicine—than which nothing is better than calomel—are indicated, or a course of Friedrichshalle or Hunyadi Janos, or of the mineral waters of Harrogate, Homburg, or Marienbad.

This treatment is, however, only of temporary service, unless at the same time, we remove the causes by making complete change in the diet and regimen.

Our patient must be instructed to take plenty of exercise in the open air, to pay a visit to his dentist if need be, to have his meals with regularity, to eat slowly, and in great moderation, to chew his food thoroughly, even soft food being well mixed with the saliva before it is swallowed—in a word, he must be instructed to do as much as possible in the way of division and digestion of his food in the mouth, so as to throw less work upon the lower portion of the digestive apparatus.

He should dine off two or three dishes, and should, for the most part, avoid many articles of diet in every day use, such as tea, coffee, spices, and stimulants, oatmeal, cheese, pastry, soups,

containing vegetables (such as hotch-potch), potatoes, raw vegetables (such as salads), and unripe fruits, fresh bread-stuffs of every kind taking toast, pulled bread, rusks, or plain biscuits instead—sweet things, unless of the simplest (such as rice pudding or stewed apples). Butchers' meat should be partaken of in small quantity, veal and pork being eschewed—raw meat is much harder of digestion than cooked, boiled than roast, old than young, and fat than lean.

A very different form of dyspepsia is one which, from a clinical point of view, may be described as weak digestion (one variety of which is the so-called atonic dyspepsia), and which is apt to be acquired by long-continued abuse of the organ of digestion, although it may occur independently of such causes, being, so to speak, natural to the individual.

The more such persons are in the open air the better, although care must be taken, in the case of those who are weakly, that exercise is short of fatigue, and intervals of complete relaxation from work and worry, with change of air and scene, are frequently beneficial, while a course of mineral waters at one or other of the more noted spas—such as Homburg, Carlsbad, or Spa—which must be selected in accordance with the surroundings of each case, may prove of much service.

The diet must be regulated with the greatest care, the food being nourishing, but light and easy of digestion. The meals should be frequent but small, fluids being taken only at the end of each, and in many cases, with the principal ones, a dessertspoonful of whiskey in potash water may be prescribed with advantage.

Tonics are frequently beneficial—especially vegetable bitters, strychnia, and arsenic—in combination with acids or alkalies, but they must be skilfully selected, for their action in different persons is very capricious and uncertain. It is in this class of cases *par excellence* that artificial aids to digestion are indicated, which consist chiefly in the use of pepsine in some shape or other, or of acids. A fresh extract of the former may be readily made according to v. Wittich's method, with glycerine as follows. The mucous membrane of a fresh pig's stomach is minced, thoroughly washed, and treated with strong alcohol, which does not affect the pepsine, but lixiviates the salts and precipitates a portion of albumen—500 ccm. of glycerine are then added; in 24 hours the extract is filtered and ready for use, the dose being 3 i or more. For those who are practising in country districts, or where expense is an object, this preparation is specially worthy of trial. For my own part I am in the habit of prescribing Benger's liquor pepticus; but there are other preparations, such as Liebreich's pepsin-essenz, which may perhaps be preferred by some.

In the majority of cases, however, it is the hydrochloric acid of the gastric juice, and not the pepsine, which is deficient, and which is