

have tried it in two cases with excellent results; complete reduction of the exophthalmia in one case. A carefully moulded pad of soft cotton is placed over each eye, filling the orbit, and a light (of not more than three turns) flannel bandage applied with gentle but decided pressure. At first I do this for only an hour twice a day; later for periods of two to four hours. In one of the cases the bandage was applied at 10 p. m., and allowed to remain all night. During the progress of the second case, which, though it existed for at least three years, is much improved. I have made occasional ophthalmoscopic examinations without detecting any damage due to the pressure. The pressure should not be great, as it is intended simply to counteract the dilation of vessels in the orbit which is the usual immediate cause of the exophthalmia.

CONSUMPTIVE TENDENCIES AS INFLUENCED BY TRIPS ACROSS THE COUNTRY IN A CARRIAGE.

There is a strong conviction that life in the open air serves an excellent purpose in warding off threatened attacks of phthisis, or in curing it. Generally, however, it is believed that to obtain the benefits of air, a locality distant from the patient's home is imperative; on the mountains, by the sea, at the South or in the North, etc. As a matter of fact, most patients are unable to leave their homes. If treated at all, they must be treated in the state in which they reside.

Many years ago a physician who had spent nearly eighty years in Vermont, over fifty of which he was in active practice, told the writer that shortly after he began the practice of medicine he broke down, and was told by his medical advisors that he was attacked by the consumption. He took his horse and wagon, and for three months spent his time in riding about New England and New York. He would travel far or near, daily, according to his inclination. At the end of the period he returned to his home and professional work, and continued it almost without interruption, till nearly eighty years of age. He died at last, not from any disease, but as the "deacon's one horse shay" vanished, all at once, without any apparent cause.

In minor forms, this observation of the effects of open air travel, has many times been confirmed by the reports of careful observers. Dr. H. I. Bowditch (*Med News*) gives a valuable contribution in support of the value of open air travel to consumptives. In 1808 his father had all the indications of consumption. With a friend he took a tour of New England in a one-horse chaise. The first day he traveled twenty-five miles, but his exhaustion and hemoptysis were so great that he was urged to return home to die. But he pushed on, and every day brought

him improved health. After his return home, he took regular open air exercise, and died of carcinoma of the stomach, thirty years later, at the age of sixty-five. One lung presented evidence of an ancient cicatrix at its apex, but both were otherwise healthy.

He said his father married his cousin, who died of chronic phthisis two years before his father. Of eight children, one died at birth, and one at eleven. All the others arrived at adult age, and married, several being still living. Of the ninety-three direct descendants of his father, not one was phthisical. This result is attributed to the journey, supplemented by the following out-door exercise, and careful regulation of the health of his children.

Dr. Bowditch thinks that many patients die from want of open-air treatment. He directs each of his phthisical patients to walk daily from three to six miles; never to stay at home all day unless a violent storm be raging. If the weather be very cold, he directs them to wear respirators. He forbids standing still on the street to talk with friends. He thinks that by following this plan, patients may be cured at home, and while still conducting their business. This seems sound sense. Better use the air at our doors and near our homes, before we fly to other air hundreds or thousands of miles away.

To those unable to walk sufficiently far to reach the best air near home, without excessive fatigue, it is advisable to use a horse and buggy, or a team driven by the patient, which is far better. The therapeutic value of a spirited span of thoroughbreds, to one able to manage them, is very great, and these, too, can be added to the effects of the open air proper. Consumptives are only one of many classes of people who would thus be benefited.—*Amer. Lancet*.

CHLOROFORM IN NORMAL LABOR.

Dr. V. O. Hardon, in the *Atlanta Medical and Surgical Journal*, translates a paper on this subject by Dr. Porak, of Paris (*Jour. de Médecine*), from which we quote the following summary: The intermittent use of chloroform in small doses during labor is a wonderful sedative for general nervous disturbances. Though an unreliable analgesic, it produces sleep, sometimes the suppression, or at least the diminution of the pain which accompanies uterine contraction, notable diminution of consciousness, and often absolute suspension of memory. On the other hand, its action is variable according to the susceptibility of the patient, according to the nature of the agent employed, and according to the mode of its administration. Its disadvantages are trivial in comparison with its advantages. The sum total of phenomena observed during its administration furnish the rules for its employment.