that it will fill up, it is a wonder that nature's cloaca is maintained at all.

Errors of diet, thought not mentioned first, are not least in causing this habit, which is perhaps, more prevalent in this country than in any other; and some one has said that it is because we eat too little soup. Water as a solvent and a diluent acts in the alimentary canal a very important part, and soup-eating should certainly be encouraged in order to counteract the tendency to take our food too solid, and to favor the fecal current.

Whatever line of diet we are in the habit of taking, and the bowels are normal, if we make a sudden or marked change in our diet, it is often attended by bowel disturbances in one way or the other. I have been in a position to observe a great many persons who have made sudden changes, particularly from a mixed, generous diet, to a vegetarian diet, which from its bulky nature imposes more work on the bowels than they are used to, often beyond their working capacity, and the result would often be acute constipation. The next step then, was to use the much-abused water enema, which to the overworked bowels, seemed a God-send, but by frequent repetition proved a blight to their work, making them a sluggard in the human economy.

I give one case to illustrate:

Mr. S. had been a vegetarian for five years or more, and had adopted two meals a day. He was in fair general health for one of such habits, but his great difficulty was no natural action of the bowels, which had existed for the last five years. His sole reliance for a movement was the coarse food and water enemata, which he had come to take regularly.

He consulted me, ostensibly for hemorrhoids, which he said the doctor who had treated him, told him he had had, and who had expected to operate on him. On making a thorough exploration of the rectum, I was not surprised to find no hemorrhoids, for he gave no symptoms of any. I found, however, a very large, pouch shaped rectum, with flabby, relaxed and attenuated walls, which I attributed to the protracted use of the water enemata.

I changed his diet, stopped the enemas, gave him three meals a day, had him drink four or five goblets of water per day, and had him inject on retiring one-third of a cup of cold water, to be retained. Ordered daily massage and kneading of the bowels, with a mild faradisation of the same; also ten drops of fld ext. casc. sag. four times a day. In four weeks' time he had natural stools, without the use of medicine or treatment of any kind.

A too concentrated diet may cause this habit, but I have observed no danger in this direction. A variable appetite, which makes extremes in quantity and quality of food, is sometimes a cause, but as this would lead us to discussion not intended at this time, we desist. I have often observed that a long journey by rail will produce a severe

constipation, and have wondered if the constant jarring of the cars has any thing to do with it.

The more difficult a disease is to treat successfully the longer the list of remedies employed; and, judging from the length of the list in this case, one would be almost discouraged from attempting a cure.

Yet with clear ideas of causes, the indications for treatment are simple, and with the hearty co-operation of the patient the physician may feel quite certain of gaining, sooner or later, the desired result.

The following I give as a general outline of the treatment, which of course must be varied somewhat according to the special indications of each case:

Regulate the diet, having three meals per day of palatable, nutritious food, not too bulky or too concentrated. Have soup at at least one meal each day.

On rising, at least an hour before breakfast, drink one or two large goblets of water. If the stomach is weak and inclined to chronic gastritis, I order the water to be drank hot. Twenty or thirty minutes following the water, give the bowels a thorough kneading for ten minutes. Then assume erect position, with arms above the head and left foot on a line with the right and placed in front of it, bend forward till the knuckles of the closed hands touch the floor, then back to the first position, repeating this five or six times; then, reversing the position of the feet, repeat the movements. This is an excellent exercise for the abdominal muscles and an inactive liver.

At night, also, before retiring, drink a goblet of water, and if there are indications of dryness of lower bowels I use an enema of one-third to one-half cup of water, to be retained.

Flushing the sewer may be a good practice with some, making the stomach the flooding tank; but we must use great care not to interfere with digestion.

When it is available, I often order a fifteen minutes' daily application of electricity to the abdomen, using the Faradic current.

If any medicine is demanded, the first on the list is cascara sagrada. I think it is an excellent "peristaltic persuader." Itrenders in my hands the most efficient service in small and repeated doses.

I impress it upon my patients to make it a daily practice to go to stool at a regular hour, to induce if possible, by voluntary muscular effort, a movement, remembering that this measure alone, if persisted in, will oftentimes overcome this deplorable habit. Perhaps the best time of the day for this is soon after breakfast. Patient continuation in this line of treatment will do a great deal to dispel this bête noir of medical practice.—

Detroit Lancet.