

makes great difference in the comfort of the patient. The amount of alkali that is required to keep the urine free from acid will vary. One minim of liquor potass. every hour in the day, or three or four drachms of bicarbonate of potassium scattered throughout the 24 hours. The local treatment is a question about which there has been a great diversity of opinion, partly at least well-grounded in results. Certainly we ought to reject everything partaking of the nature of instrumental interference with the urethra during the acute stage. The introduction of any instrument whatsoever is disadvantageous, even disastrous. I feel keenly on that point, because I have at different times tried the use of various instrumental appliances. Some years ago I used the endoscope in about twenty cases, and packed the urethra almost from the triangular ligament forward with iodoform, boracic acid, bismuth, etc. It was my misfortune to see three cases of epididymitis occur out of these twenty. Then, some four or five years ago, when Dr. Holbrook Curtis, of New York, advanced his plan of treating gonorrhœa by hot water injections, I employed that method in twelve cases and had the misfortune to see two cases of epididymitis. As it has been my fortune not to see epididymitis in cases where there was no instrumental interference, I felt convinced that the occurrence of these five cases of epididymitis in thirty cases of gonorrhœa with instrumental interference was more than a coincidence. \* \* I have seen advantage in the use of some form of hydrastis, usually with bismuth or gum arabic, and, if there is much pain and swelling, cocaine or morphine. These are used during the first ten or twelve days; after that a mineral astringent may be of service. Injections should be used after each urination, assuming that the urination is at ordinary intervals during the day. One thing I am in the habit of insisting upon is the use of a half-ounce syringe. The ordinary urethra holds about half an ounce, and if we are going to use an injection we want to do it thoroughly; we want to unfold the mucous membrane and apply the injection to the surface, so far as may be. \* \* There is one other item that might be worthy of mention, which is the use of cotton in collecting the discharge. Every one who is at all fastidious about his person has a great objection to the escape of

the discharge on his clothing, and the average man takes a little piece of cotton and inserts it under the prépuce, and thus secures more or less freedom of the linen from stain. I believe this is detrimental, because it occludes the urethra, and shuts up the discharge. In every other case of suppuration we want free drainage, and the urethra naturally drains itself freely, because of the muscular contraction natural to it. I think a great many patients do themselves harm by wearing this cotton. I am accustomed to direct those who will take the trouble to avoid that detriment and yet protect their linen by wearing a condom, in which is placed the cotton, and which is brought up in such a way as not to fit firmly against the meatus. The condom is attached by tapes, or bands, to the shirt; not by having the neck tied around the organ, as that would produce congestion also.—*Dr. W. T. Belfield, in Western Medical Reporter.*

SEA BATHING.—Sea bathing is for most people a powerful restorative, and the benefit conferred will last during the ensuing winter. It is *par excellence* the great remedy for scrofulous, glandular, and articular enlargements. It is accordingly useful in bracing up delicate children, and defending the system against subsequent cold catching. Vaginal and uterine congestions and relaxing discharges are generally benefitted, as are also spinal weakness and incontinence of urine in the young. I have known a certain amount of irritability of the heart, the result of tobacco, completely cured by sea-bathing, followed by super-cardiac rubbings.

It is useful in torpid conditions of the skin attended with profuse perspiration, also in muscular rheumatism, though in articular rheumatism hot baths only should be used. That form of rheumatic taint accompanied by choreic twitches and hysteria is often benefitted by mild bathing, and it has been recommended in diphtheritic and typhoid paralysis, and nervous dyspepsia; amenorrhœa, anæmia, and chlorosis are sometimes benefitted. Such cases should first be treated by the use of tepid sea-baths.

The following should not bathe in the sea: Those subject or predisposed to fits, as the epileptic or apoplectic; sufferers from cutaneous eruptions, organic disease of the heart or great