s'eep is the consequence of exhaustion of the usual nervous stimulant in the services of the waking hours, or exhaustion along with the waste of the tissues generally. Liebig puts it thus, "Since in different individuals, according to the amount of force consumed in producing voluntary mechanical effects, unequal quantities of living tissue are wasted, there must occur in every individual, unless the phenomena of motion are to cease entirely, a condition in which all voluntary motions are completely checked, in which, therefore, these occasion no waste. This condition is called sleep." Dr. Carpenter puts it thus: "The occasional suspension of sensorial activity is requisite for the reparation of the destructive effects of that activity; so that, however unfavourable may be the external circumstances, sleep will supervene as a necessary result of exhaustion, when this has been carried very far."

That exhaustion is one, perhaps the one great condition of sleep, is unquestionable; but that it is not the only condition is no less true, unless we adopt the views of Liebig, "that wine, narcotics and other sleep-inducing agents, produce a state of artificial exhaustion, by putting a stop to the regular changes of matter, especially its union with oxygen, which is constantly going on within the body." Moreover, he says: "There is a state of over-exhaustion, both of mind and body which tends to keep off sleep rather than to induce it."

A recent lexicon describes it as "the state of rest and recuperation of the bodily and mental voluntary powers. The consciousness may also be inactive or dreaming, i.e., without the guidance and data of the will and lower centres, and hence illogically functional sleep-walking."

It is customary that the regular practice of sleeping once in the twenty-four hours, be carried on as most suitable and conducive to health. The amount of sleep necessary for an individual depends on the time of life, constitution and acquired habits.

Practically, sleep is a natural condition. Medical men have, by their professional labours, this portion of their time frequently invaded upon. In many places the public recognize the right of the profession to a larger fee, *i.e.*, double that of the regular visit in the day time. We hope some other member of the profession will give us an essay on this

important subject—important to the patient when it is lost, and requires the use of sedatives and narcotics to restore it.

Napoleon, it is said, possessed the power of falling asleep almost momentarily, and this faculty has been quoted to prove that sleep was an active state, rather than a passive one. It is nature's sweet, balmy restorer, and, as such, is of the greatest importance to physician and patient.

SUPRA-PUBIC LITHOTOMY.

We are informed that Dr. Alex. McNeill, of Kensington, and Dr. Taylor, of Charlottetown, performed recently an operation for lithotomy, on a young man under very unfavourable circumstances. The operation was skilfully performed, and so far has proven quite a success. We trust Dr. A. McNeill will give an extended report of the case, and describe the operation, as well as the history of the case. There were two large calculi extracted, and the relief to the poor patient was great—another triumph added to the list of the surgeon's skill. Not having been present, we are unable to enter into details.

Dr. Macleod, of Charlottetown, we are also informed, performed an ovariotomy lately. The case is doing well. Would like very much to have a report of the case. The Doctor is a skilled anatomist and able surgeon.

Original Communications.

DOUBLE EMPYEMA.

BY J. BAUGH, M.D.

On 26th December I was called to see Willie S., aged 2½ years, and found him suffering from inflammation of left pleura. In a few days the cavity became completely filled with effusion. During the second week the right pleura became inflamed and the child's condition had become serious. During the third week the left side became greatly distended and the soft tissues covering the same very ordematous. The right cavity was filled with effusion to a point one inch above the posterior inferior angle of the scapula. On the 20th January, about four weeks from the commencement of the attack, the fluid in right cavity