

the extremities colder and bluish in color, the pulse frequent and feeble, the fontanelles depressed, and the child rolls its head from side to side on the pillow. If the axillary temperature of that child be tested, it will almost certainly be found to be between 103° and 106° F., notwithstanding the coldness of the extremities. Such cases must have relief promptly or they will all die. The indications are to rid the bowels of offensive accumulations, to arrest the vomiting, to preserve the strength and to reduce the temperature. Purgatives will seldom remain on the stomach, nourishment and stimulants are rejected in the same manner; it is generally useless to administer anti-emetics, and even if we could wait for the action of drugs that reduce the temperature, they would as a rule be inadmissible on account of their depressing influence on the circulation. If a child in this condition be placed in a cold bath for from five to twenty minutes, according to the heat of its body and the coldness of the water, the temperature will fall to the normal standard, the heart will beat with more force, the thirst will be less intense, the circulation will become equalized, sleep will generally be procured, and the stomach will retain nourishment and medicine. If after a few hours the temperature rise again, the bath can be repeated, but, by allowing the child to lie naked and be sponged and fanned, its repetition may not be necessary, for if, in the meantime, a purgative dose of rhubarb or castor oil be given, the tendency to a rise of temperature will not be so great.

I have frequently seen children, that had tossed and moaned for hours, fall into a quiet sound sleep in the water in a few minutes, and continue to sleep well after being taken out.

As an illustration I have transcribed from my case book the following typical cases.

CASE I. July 27th, 1878.—J. Ellison, æt. 5 months, strong and well nourished, has had diarrhœa for forty-eight hours, and the mother thinks fever also. Looks distressed, temperature 105° F., pulse 130, evacuations greenish and offensive, and about twelve a day. Ordered rhubarb and soda bic. aa gr. iv. every two hours.

28th, 10 o'clock a.m.—The child has not rested, but cries and tosses about incessantly. The extremities cold, and temperature 105° F. No pulse at wrist, breathing labored, fonta-

nelles depressed, eyes sunken, features pinched and bluish, and it refuses to nurse.

Put it into water from the well until axillary temperature fell to $99\frac{1}{2}^{\circ}$, when the child fell asleep. Soon after its removal from the water the pulse returned at the wrist, and the body and extremities became of about uniform warmth.

At 1.20 p.m. the temperature had risen to 104° , and the child was again restless. Repeated bath with same result as first.

29th.—Rested well all night, and has nursed several times. Temperature $99\frac{1}{2}^{\circ}$. Parents had used sponge bath and fan frequently through the night. Stools greenish. Ordered a dose of castor oil and chloral enough to make it rest.

30th.—Passed a comfortable night, and nurses well; has been sponged several times during last twelve hours; temperature $99\frac{1}{2}^{\circ}$. After this an occasional dose of rhubarb and soda was the only medicine given, and the child soon recovered entirely.

CASE II. July 12th, 1876, 10 o'clock a.m.—Caspar Schweinler, a robust child five months old, has had diarrhœa for three days, but not very ill until yesterday, since when it has neither nursed nor slept, but has constantly uttered half suppressed cries. It is pale, hands and feet cool and skin dry. Gave a purgative dose of rhubarb and calomel.

3 o'clock p.m.—Bowels well moved by the medicine, the last evacuation being natural in color. Extremities cold, pulse imperceptible, pupils contracted, face leaden hue, and thirst intense.

The axillary temperature to my surprise was 105° , for I had been deceived by the coldness of the extremities and the general appearance of the patient, and did not expect to find temperature so high.

Gave half a drachm of brandy and put it into a tepid bath, and rapidly cooled it by the addition of cold water. In ten minutes the temperature fell to 102° , and sleep came on for the first time in thirty hours.

When the mercury fell to 100° I removed the child from the water, and it slept most of the afternoon, and was not thirsty. As the temperature fell, the pulse became better and the pupils larger.

8 o'clock p.m.—Temperature 103° , child sleeps well, and looks comfortable. Bath re-