

not far distant, if not already here, when the courts will take cognizance of failure to render such services when thus indicated, since they are a part of the service which the thoroughly equipped practitioner renders his patient. The only amends which can be made for failure to make the immediate repair, in case the attendant is not prepared with appliances and a knowledge of the technique of the procedure, is to call for assistance upon some one that is prepared.

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TREATMENT OF APPENDICITIS.—Dr. F. C. Wells, of Chicago, in *Chicago Clinical Record*, August, summarizes his treatment as follows. Absolute rest in bed is necessary. Of sixteen cases, he has had only four that he has turned over to the surgeon. In two of his cases there was no previous constipation. In one there had been diarrhœa. One grain each of calomel and soda is given every hour until the bowels move freely. Hot fomentations are applied, and the surface well moistened with a mixture of turpentine and camphorated oil. Good-sized flaxseed poultices are useful. The diet is limited to milk. Opium is ordered for the relief of the pain, although its use is condemned by some. There seems to be a connection between rheumatism and appendicitis, and in suspected cases of this kind, two in number, salicylates have been pushed freely with the greatest advantage. The high injection of hot water is of decided benefit.

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THE MANAGEMENT OF PERTUSSIS —Charles G. Kerley, of New York, in the *New York Polyclinic* for 15th August, remarks that, after a most careful study of the leading remedies for whooping-cough, the following conclusions may be safely laid down: 1. Treatment by insufflation of powders into the nostrils is of no value, neither is the cresolene lamp, nor the use of embrocations. 2. Belladonna is of no use whatever, though given to the point of physiological effects. Alum, extract of horse-chestnut leaves, dilute nitric acid were equally worthless. 3. Quinine in doses of ten grains to fifteen grains every twenty-four hours to children from three to five years of age during the paroxysmal stage was often very effective in lessening the attacks in severity and frequency. 4. Bromoform is of no value, and may be dangerous. 5. The bromides are helpful to a certain extent, the best being the soda salt. 6. Antipyrin was of the greatest service. For a child of eight months, gr. ss. every two hours; for fifteen months, one gr. every two hours, from two years to four, two grs. This may be combined with soda bromide. No bad effects noticed.