gave 20 drops of the fluid extract every four hours, until a decided improvement took place, and then diminished the frequency, finally giving only one dose at night.

In the *Brit. Med. Journal*, 1878, vol. II, page 500. Dr. William Bird, of York, states that he has derived great benefit from the hypodermic injection of ergotine in doses of ⅓ of a grain.

Pressure has been recommended as a means of diminishing the bulk, or retarding the growth of a hypertrophied prostate, and the use of large catheters or sounds is probably of some service in this respect.

Electricity has been recommended, but it has not realized the expectations of those who have used it.

The removal of obstructing portions of the prostate by ligature, excision or crushing has been recommended, but there is a difference of opinion among surgeons as to the expediency of this method of treatment. Gouley recommends a median incision of the perineum, opening the membranous part of the urethra on a grooved staff, and introducing a catheter into the bladder. In a more severe class of cases, he recommends the ablation of the median prostatic outgrowth. He explores the prostate by introducing a finger through the perineal section, and if a median outgrowth or isolated tumor be discovered, he enucleates the tumor, or excises the outgrowth, or removes it with a wire ècraseur. After the removal of the tumor, he leaves a catheter in the bladder a number of days. —*New England Med. Monthly.*

ON DIET IN DISEASE.

Di. J. Milner Fothergill gives the following in the *Medical Times*, May, 2, 1885:

A patient amused me very much yesterday. She had been for some time getting weaker and thinner, with her liver out of order, while her medical man had been feeding her upon meat and giving her vegetable tonics and iron, but without good result. At last she suspected that the treatment did not suit her, and so consulted me. When asked to put out her tongue, she observed, "The other doctor never asked to look at my tongue." If he had, he might have been more successful with his treatment. "Has he been giving you steel?" I asked. "Yes, and it did not agree with my liver," she promptly added, evincing a shrewdness that took me aback. On vegetable tonics without iron, and much lighter food, she got on famously. Yesterday she called to report her improvement.

Some time ago, in conversation with the manageress of one of the many Homes now springing up where paying patients can be nursed, the subject of feeding sick persons cropped up, and she was very enthusiastic about "a twenty-minutes pudding," but of what it consisted did not transpire. A tentative remark about the digestion of the starchy materials of our food flew past her unheeded. It was soon clear that of any rational ideas of digestion, theoretically or practically, she was in unillumined ignorance: all she knew was a little empirical knowledge, and of that she did not possess a superabundance. Who then, is to know this matter of feeding? Who is to tell the student of the difference betwixt raw or uncooked starch and cooked starch?—that in the latter the insoluble starch-granule is not only cracked, but the starch is largely converted into soluble dextrin by exposure to heat? that by the addition of some such soluble carbo-hydrate to meat-broths they endow these broths with a decided food-value? and that the meat-broth itself is but an agreeable vehicle for some food? Yet this is what he ought to be instructed in, if he is to be fitted to meet disease. When the patient sinks of exhaustion, of what does he die? His stores of force are run out; but what is the material which constitutes the body-force? I should read with delight a lecture upon this topic by Dr. Austin Flint or Dr. Da Costa,—or perhaps some less illustrious physician will grapple with the topic. We know that when a patient declines all food he will die in a given number of days. If a healthy person be hungered, as by shipwreck, he also will live a given number of days. In the latter case death will come all the sooner if the surrounding temperature be low. In the former case the duration of life will be shorter as the body-temperature rises. There is a question of combustion involved. It may not be the whole question, but it is an important factor! Alcohol is a readily-combustible hydro-carbon: it is used freely in critical times. Does not the idea naturally suggest itself that somehow the store of glycogen—the body fuel—is a cardinal matter? If this be so, it is evidently desirable to keep up the stock of this material so that it may not be exhausted. If raw or uncooked starch be employed, probably it is little acted upon by the diastase of the saliva, or even the diastase of the pancreas, both organs being crippled by the general malaise. But a starch which has been rendered soluble by previous baking or by the matting process has been so modified that it is highly soluble.

I do not know how the matter stands in the United States, but as regards the mother-country, little, very little use indeed is made of those prepared foods spoken of—sometimes derisively—as "Baby-Foods," either in cases of primary dyspepsia or in that debility of the digestive organs which is involved in serious morbid conditions. Yet by the addition of cooked starch, as biscuit-powder, to meat-broth, and of malt preparations to milk or milk somewhat diluted with water, foods