

depression and flushing heats so common at this period. In pneumonia sleep comes usually at the crisis; but where this has not occurred, he has occasionally seen a hypnotic, such as chloralamide or paraldehyde, turn the scale in favor of the patient. In pleurisy five to ten grains of Dover's powder usually conduce sleep, mainly by relieving the pain. A hypodermic injection of morphine may be given with the same object in view. In bronchitis, chloral and chloralamide are safe hypnotics, and, as a rule, opiates are to be avoided, as they depress the respiratory centre. The insomnia of heart-disease is benefited by cardiac tonics; but in some cases it is necessary to resort to morphine, either by the mouth or, still better, hypodermically. Paraldehyde and chloralamide are most useful in the writer's experience. Ice to the head is recommended by Morison, where the vital forces are not too low or the temperature subnormal. It often produces sleep rapidly, with a more regular cardiac action. In chronic Bright's disease insomnia is occasionally very troublesome. Eliminants, such as aperients, should be tried, and if they do not succeed chloral hydrate may be given; the drug is safer in kidney-disease than in heart-disease, the reduction of blood-pressure being usually more beneficial than otherwise. Morphine and hyoscyne subcutaneously injected have been recommended in obstinate cases; but their employment requires great caution. Erythrol tetranitrate, by reducing arterial tension, often acts as a charm even when sedatives fail. In cases of neuralgia, locomotor ataxia, and so forth, some of the synthetic analgesics—phenacetine—are of value. These drugs act also as hypnotics in cases where there is no pain. Calcium chloride is a valuable remedy in the insomnia due to pruritus. But when pain is the casual factor of insomnia, morphine is the best general remedy, and this should be pushed until relief is afforded.

NIGHT TERRORS, SYMPTOMATIC AND IDIOPATHIC, WITH ASSOCIATED DISORDERS IN CHILDREN.

Guthrie (*Clinical Journal*, June 7, 1899) concludes a paper on the above subject as follows:—

(1) Night-terrors are always to be regarded as evidence of ill-health.

(2) They may be divided into symptomatic and idiopathic night-terrors, according to their origin.

(3) Hallucinations of vision are mostly caused by a febrile disturbance.