

public and private water supplies. Lead service pipes were now being replaced by iron, and in future the connections would be of galvanised iron with short lengths of tinned lead pipes. The contamination of the water with lead was entirely avoided by the use of wrought iron glass-lined pipes, the cost of which was reasonable, being only expence per foot for half-inch diameter. This he recommended when the water was very soft and pure. Much of the lake and river water in Canada is of a soft character, and no doubt often acts upon and dissolves more or less lead from service pipes.

DR PUTNAM recently reported to the Boston Society for Medical Improvement, the notes of twenty-five cases of chronic arsenic poisoning; one of which was observed by the author himself is fully recorded. The series is a valuable addition to the present knowledge of the symptomatology of a condition which is often very difficult to diagnose. Dr. Putnam specially directed attention to the comparatively frequent occurrence of albuminuria, and asked whether arsenic might not occasionally set up a chronic nephritis. Professor Wood mentioned a case of temporary albuminuria, occurring in a lad about 15 years old; so that arsenic it would seem, may be one of the often overlooked causes of the albuminuria of adolescents. Another set of symptoms, the significance of which as evidence of arsenic poisoning, is often overlooked or ignored—numbness, formication, muscular weakness, and altered electrical reactions. In Dr. Putnam's case the loss of muscular power, as measured by the dynamometer, was very marked. In several of the cases insomnia was a troublesome symptom; in others, neuralgia; and in others, again, great irritability of temper. Sore throat was often observed, inflamed eyes less often. Derangement of digestion was not always present; the most characteristic conditions seems to have been colic, followed by diarrhoea.

DR. HILLS, Assistant-Professor of Chemistry at Harvard, states that the number of wallpapers imported into the United States which contained a dangerous amount of arsenic was rapidly increasing; the smallest amount he had known to produce symptoms was one-third of a grain, estimated as white arsenic, to the square yard of paper. Not long ago we observed it reported that fewer arsenical colorers are now used, however since so much attention has been given to this sort of poisoning, than were formerly used.

A CASE of infection of an infant through the milk of a tubercular nurse is reported by Dr. Steigenberger, of Buda-Pesth (in *Pesth. med. chir. Presse*). An infant, aged five months, of healthy parentage, developed cascating cervical, glandular abscesses, of a distinctly tubercular kind. Microscopical examination verified the macroscopical diagnosis. Inquiry elicited the fact that the infant had been nursed, for a period of four weeks, by a woman who had to be discharged on account of phthisis, with abundant expectoration. The etiological relationship was thus clearly established.

IN REFERRING to this case the Medical Record says: The infection of human beings through the milk of tuberculous animals has been repeatedly shown. . . . but, so far as we are aware, this case is the first instance in which this method of transmission has been actually observed to occur. However probable it is that the milk was the source of the infection, it is possible the child may have been infected through the lungs from inhaling the infection in the expired air of the nurse.

A CASE in point was reported in this JOURNAL five or six years ago which may be repeated in brief in this connection with profit. It was first reported by Dr. W. J. Wilson, of Richmond Hill, Ont., to the Canadian Practitioner, Aug. 1883. B. W. aged four months; family history good, and no trace of phthisis or syphilis discoverable in either family. Had had no previous illness, was plump, fat, and well nourished. The mother was forced to wean the child when about a month old, and it was fed on cow's milk from a bottle, and thrived well for a time, having no digestive troubles. It was attended by a nurse, who was well advanced in consumption, and had free expectoration. The child slept with the nurse, and consequently was much exposed to her breath. Nothing unusual was noticed in the child's condition for the first three or four weeks after the nurse's arrival, when it began to lose flesh and cough slightly. This cough and wasting gradually increased, and finally Dr. Wilson was called in. On examination he found well marked and far advanced phthisis, with frequent cough and great emaciation. The child died in its eighth month, three months after the first symptoms were noticed. The same nurse, who later on died of consumption, attended five other children, and four out of the five died of some wasting disease, but as Dr. Wilson did not see any of them he was unable to state its nature.