

14. When the child holds his hand upon his head, or strives to rest the head upon the bosom of his mother or nurse, he may be suffering from ear disease.

15. When the fingers are carried to the mouth, and there is, besides, great agitation present, there is probably some abnormal condition of the larynx.

16. When the child turns his head constantly from one side to the other there is a suggestion of some obstruction of the larynx.

17. A hoarse and indistinct voice is suggestive of laryngitis.

18. A feeble and plaintive voice indicates trouble in the abdominal organs.

19. A slow and intermittent respiration, accompanied with sighs, suggests the presence of cerebral disease.

20. If the respiration be intermittent, but accelerated, there is capillary bronchitis.

21. If it be superficial and accelerated, there is some inflammatory trouble of the larynx and trachea.

22. A strong and sonorous cough suggests spasmodic croup.

23. A hoarse and rough cough is an indication of true croup.

24. When the cough is clear and distinct, bronchitis is suggested.

25. When the cough is suppressed and painful, it points toward pneumonia and pleurisy.

26. A convulsive cough indicates whooping-cough.

27. A dry and painless cough is sometimes noticed in the course of typhoid and intermittent fever, in difficult dentition, or where worms are present.

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HYSTERIA IN A NEW LIGHT.

According to *The Lancet*, September 4, 1886, (*Med. Record*) the views of Mr. de Berdt Hovell on the subject of hysteria are to be carefully received as those of a shrewd practitioner of long practice and large experience. He strongly protests against the whole hypothesis of hysteria. He thinks the theory that localizes the disease in the uterus is the mere survival of medical demonology, which located ill-humor in the spleen, blue-devils in the liver, and the soul in the pineal gland. He claims for hysterical patients more fairness of treatment and more discrimination. He attributes many of the cases to shocks, physical or moral, leading to deficient or depressed nerve-power, with all that this implies in the way of pain, irritability, inability for locomotion, etc. Mr. Hovell admits that the cases are difficult to cure; but he maintains that if we are to deal with them effectually we must "set aside all considerations of the organs of reproduction, which most probably are not concerned, and transfer our attention to the moral nature." Mr. Hovell gives several cases in which there was a distinct history of shock or exhaustive work, to explain the break-down in the nervous system. We

live in days when the nervous system is getting its full share of attention from pathologists and physicians, and when even gynecologists are finding out that the uterus, and even its appendages, which are now blamed by some for everything, are not such culprits as has been supposed. Mr. Hovell will admit that the cases of so-called hysteria do occur chiefly, though by no means exclusively, in women. In their organization there is *something* specially favoring the occurrence of this state or disease. It may not be in the special organs of the female as much as in the special organization of the nervous system. Mr. Hovell deserves credit for insisting on this point, and he may well be satisfied to know that the drift of opinion among physicians is toward the acceptance of his views. Women are more finely strung than men. They are more liable to pain or pains of all sorts from mere functional causes. Such a constitution is perplexing to the physician; but it has to be considered, and not treated as a sort of crime, as has too often been the case.

THE NIGHT-SWEATS OF PHTHISIS TREATED BY SECALE CORNUTUM.

Mingot reports in the *Journal de Médecine de Paris* (*Ther. Gaz.*) as to the unexpectedly favorable results obtained with secale cornutum in the night-sweats of phthisical subjects. He observed in Tenneson's clinics at Paris that 15½ to 31 grains of ergot given in powder form, or, better, 2 fl. dr. of ergotinine injected hypodermically half an hour previous to the expected appearance of the sweat, could suppress the latter for a week or even longer. No other of the numerous remedies recommended against night-sweats was, save atropine, found to have so great an effect as ergot or ergotinine. To be sure, the tubercular process is in no way influenced by the exhibition of this remedy, but it is gratifying to be able to stay one of the most annoying, and at the same time weakening, factors of the disease.

TREATMENT OF CHRONIC CONSTIPATION IN CHILDREN.

Dr. W. B. Cheadle, at the close of a clinical lecture on this subject, points out the disastrous results of mistaken treatment, and shows the necessity of a more rational procedure. "Look, at the evil effect of strong purgations—how they enervate and wear out the tone of the bowel. No occasional purge of rhubarb or scammony is efficient to cure. Look, again, at the evil effect of frequent enemata. Enemata are only to be used on an emergency. They, equally with strong purges, impair tone and do direct harm by actual dilation. In confirmed cases of constipated habit, treatment must not be intermittent, but continuous; the daily administration of appropriate remedies steadily, for a considerable period, is absolutely essential. Intermittent treatment is abortive, ineffectual, and aggravates the evil. What, then, is the proper