nerve. The latest local application is the application of the menthol pencil. Electricity is rapidly assuming an important place in the therapeutics of this disease; the best form is that of the primary galvanic current, which should be applied for at least thirty minutes, and should be repeated daily for several weeks. Sometimes the pain is so severe that the hypodermic injection of solution of morphia or, of Batley's sedative solution is demanded. It should if possible, be injected along the course of the affected nerve. This patient I have placed on two grains of quinine 3 times a day, and given her iron, in the form of the saccharated carbonate of iron, which is one of the ferruginous preparations which is easily assimilated.

Progress of Science.

TREATMENT OF ACUTE INFANTILE BRONCHITIS.*

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Infantile bronchitis is probably the most frequent disease which the physician is called upon to treat. It is usually mild and readily controlled by proper remedies, but in other instances, especially when neglected or improperly treated, it becomes by extension downward to the minute bronchial tubes, or to them and the alveoli, one of the most fatal maladies of infancy. It is, therefore, very important that bronchitis in the infant receive timely and proper treatment.

A brief glance at the clinical history of this malady will help to a correct knowledge of its therapeutic requirements. Acute bronchitis is in most instances preceded. and in its first stages accompanied, by coryza, which first arrests the attention of the parents, but within a day or two the inflammation extends to the larger bronchial tubes, and is announced by a cough. The bronchitis is often limited to these tubes throughout the attack, under which circumstances it is so mild that treatment is scarcely required, but between this mild disease and that severe form in which the minute bronchial tubes are involved, there is every grade of severity.

Bronchitis in the infant is primary or secondary. Two diseases are always accompanied by it, in a form so severe that the cough which it causes is a prominent symptom in each, to wit, measles and pertussis. It occurs also in a mild form in typhoid fever, and is present in tuberculosis, and in many cases of diphtheria. It requires, in a measure, different remedies according to the conditions in which it occurs, but the treatment may be most conveniently considered under the two headings of mild and severe bronchitis.

Bronchitis can probably be aborted or rendered milder in some instances by an emetic employed when the first symptoms appear. Its effect is more certain if the patient drink warm water at the same time, and take a warm foot bath or general bath. The syrup of ipecacuanha is perhaps the best medicine for this purpose. It promotes bronchial secretion and diminishes the force of the circulation. But ordinarily the physician is not summoned until the bronchitis is established, and measures designed to abort it are inadequate.

Treatment of mild Bronchitis. The inflammation is limited to the larger tubes, or to these and those of medium size; if to the larger tubes, it gives little inconvenience, and often passes off without treatment. The patient is said to have a cold. In mild bronchitis, the respiration is but slightly accelerated, the temperature not above 102°, the cough not painful, or attended by a slight degree of soreness in the upper sternal region; the thirst is moderate, and the appetite not notably diminished.

In this form of bronchitis, in which there is no increase of symptoms from day to day, demulcent and mild expectorant medicines are sufficient to cure the disease. Even domestic remedies are sufficient. It is of such cases that the late Dr. James Jackson, of Boston, in his advice to a young physician, wrote as follows; "For young children I employ the following: Take of either almond or olive oil, of syrup of squills of any agreeable syrup and of mucilage of gum-acacia, equal parts, and mix them. Of this mixture, a teaspoonful may be given to a child two years of age, a little less, if younger, and increase if older, so as to double the dose to one in the sixth year."

Of the mixtures officinal in our pharmacopœia, the mistura glycyrrhizæ composita is perhaps the best for mild bronchitis, and it is largely used. It is beneficial not only in the primary disease, but in the secondary or symptomactic bronchitis of measles and pertussis. The small amount of tartrate of antimony and potassium which it contains, $\frac{1}{64}$ grain to the drachm, has a slight sedative effect on the action of the heart without causing nausea, and it promotes expectoration. The paregoric in this mixture being one part to eight, is useful if the infant be restless, and deprived of the needed sleep. A patient of one year can take one-third of a teaspoonful, and one of two years half a teaspoonful, every two to four hours. The syrupus ipecacuanhæ compositus of the French pharmacopœia is also one of the most beneficial remedies for mild bronchitis. It is slightly laxative, and it produces no narcotic effect. It consists of the ipecacuanha and senega roots, thyme, the blossoms of the red poppy, which I believe are not narcotic, orange-flower water, white wine, sugar and a small amount of sulphate of magnesium. An infant of eight months can take half a tea-

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