

important that the proper method of bathing should be adopted, and that its *rationale* be well understood.

In these cases there is usually profound involvement of the nervous system, frequently manifested by a dull, apathetic countenance, sunken eyes, deadly pallor, cool extremities, not rarely terminating in outspoken eclamptic seizures. Medicines and stimulants are useless, because the stomach and rectum do not tolerate them. Such a child should be put at full length into a tub of water at 90°, after its face and head have been bathed with ice-water; gentle friction should be constantly made while some one is removing with a pitcher the tepid water and replacing it by ice-water poured over the side of the tub farthest from the patient's body. The temperature of the bath is thus gradually lowered to 80°. If there be marked cerebral disturbance, water at 60° may be poured upon the head and shoulders. The child's body must be entirely submerged, the head only not being immersed. Its cries and protestations of chilliness must be met with gentleness, yet with firmness. For fifteen minutes the agitation of the water and friction of the body should be kept up, unless cyanosis of the face or decided shivering ensues. The latter will be prevented by active friction, which stimulates the peripheral circulation.

After the bath the child is placed upon a linen sheet, previously laid smoothly upon a blanket. If the temperature before the bath—and it should always be taken at this time—has been 103.5° or higher, the child should be wrapped in the sheet so that every part of the body and extremities is well covered by it; the blanket is now snugly wrapped over and tucked under the body, which is thus allowed to dry. If, on the contrary, the temperature has been below 103.5°, the child should be gently mopped dry and its clothing be replaced at once. Such a bath is almost invariably followed by calm and refreshing slumber, from which the child awakens bright and playful.

Let it be understood that the object of this bath is not to reduce temperature, although this is an important incidental result. We have here a vaso-motor paralysis, as evidenced by the pallor of the entire body, even when a high temperature is registered in the rectum. By im-

mersing the entire body in tepid water we produce a mild shock, which is gradually increased by the removal of warm and the addition of cold water, and is enhanced by frictions of the body and constant agitation of the cooling water against the skin. These gentle shocks are succeeded by equally gentle reactions, so that the cutaneous vessels dilate, as evidenced by redness of the skin. If, in addition, the face and head are bathed with a little colder water, at 60°, the shock and reaction are increased, the respiration deepens, the heart beats with more vigor and less rapidity, the eye brightens, the color returns to the lips, the child becomes more animated.

The effect of a skilfully-administered bath in the condition of nerve prostration incident, in many children, to acute summer diarrhœa must be observed to be fully appreciated. In my experience it has been an inestimable boon, affording hope and comfort under the most trying and desperate conditions. My mind still retains vivid recollections of the days when I was a student and of the early years of my practice, when the condition of profound adynamia, usually associated with hyperpyrexia, was called spurious hydrocephalus, and the cases were allowed to die under blisters to the nucha and small doses of calomel. These cases do not now come under my observation; they are forestalled by the bath and by more rational treatment, foremost in which is judicious gastrointestinal irrigation.

When there is objection or prejudice to tub-bathing, or when there is extreme jactitation, or when there are convulsions, the little patient may be placed in the wet pack, or the bath may be followed by the latter to maintain the calming effect. The wet pack is prepared by wringing out of water at a temperature of from 50° to 60° a linen sheet folded into a third of its usual size and smoothly laid (folded to suit the size of the child) upon a blanket. The child is snugly wrapped in the damp sheet (which may be made more wet if the temperature be high), so that the arms receive a fold to separate them from the body, and the legs a fold to separate them from each other. The blanket is now snugly tucked around the child, so as to completely envelop it, like a mummy, to prevent evaporation. This pack may be repeated two or three times, at intervals of ten minutes. The previ-