

matism in the lower extremities and vascular disease. The pains complained of are situated in varying parts of the feet and legs, the feet are cold, and numbness may be experienced. The skin looks pale, and is often desquamating in minute scales. Sometimes patches of characteristic erythematous œdema may be seen with an increase in the symptoms above described. In these cases the pulse should be carefully examined. Differences may be present, and the arteries may be found degenerate. These manifestations are not to be confounded with articular affections, nor with sclerosis of the veins. No varices or pigmentation are present. Localized œdema is, of course, not to be mistaken for more general œdema due to venous obstruction. It may be difficult to distinguish this affection from neuralgia, and in cases of arterio-sclerosis the nerves may also be involved. For proof from morbid anatomy the author refers to cases of angio-sclerotic gangrene slowly developed and preceded by pains. He cites a case of gangrene in a girl, nineteen years of age, with diseased arteries, in which rheumatic pains had long preceded the gangrene. As to whether these rheumatic pains are a preliminary stage to gangrene cannot be denied with certainty in some cases. If the collateral circulation is sufficient, gangrene occurs, but this last stage is often not seen. The author warns against local massage in these cases of arterio-sclerotic rheumatism. Some patients whose disease is written of as rheumatism, or even hysteria, thus really suffer from arterio-sclerosis.—*N. Y. Med. Rec.*

MEDICINE AND SURGERY AMONG ANIMALS.—Animals get rid of their parasites by using dust, mud, clay, etc. Those suffering from fever restrict their diet, keep quiet, seek dark and airy places, drink water, and sometimes plunge into it. When a dog has lost its appetite, it eats that species of grass known as dog's grass, which acts as an emetic, and purgative. Cats also eat grass. Sheep and cows, when ill, seek out certain herbs. Animals suffering from chronic rheumatism always keeps, as far as possible, in the sun.

The warrior ants have regularly organized ambulances. Latrielle cut the antennæ of the ant, and other ants came and covered the wounded part with a transparent fluid secreted from their mouths. If a chimpanzee be wounded, it stops the bleeding by placing its hand on the wound, or dressing it with leaves and grass. When an animal has a wounded leg or arm hanging on, it completes the amputation by means of its teeth.

A dog, on being stung in the muzzle by a viper, was observed to plunge its head repeatedly for several days in running water. This animal eventually recovered. A sporting dog was run over by a carriage. During three weeks in winter it remained lying in a brook where its food was taken

to it. This animal recovered. A terrier hurt its right eye. It remained under a counter, avoiding light and heat, although it habitually kept close to the fire. It adopted a general treatment, rest and abstinence from food. The local treatment consisted in licking the upper surface of the paw, which it applied to the wounded eye, again licking the paw when it became dry.

Animals suffering from traumatic fever treat themselves by the continued application of cold, which M. Delaunay considers to be more certain than any of the other methods. In view of these interesting facts, we are, he thinks, forced to admit that hygiene and therapeutics, as practiced by animals, may, in the interest of psychology, be studied with advantage.—*Form Folks.*

THE TREATMENT OF INTESTINAL HÆMORRHAGE IN TYPHOID FEVER.—Dr. E. Maragliano, Professor of Clinical Medicine at the Medical Faculty of Genoa, maintains that the occurrence of intestinal hæmorrhage during an attack of typhoid fever is not such a grave complication as is generally believed. Not only has he never lost a single patient from the acute anemia due to the accident—a statement which will probably be received with surprise by many a practitioner—but he is even of opinion that the occurrence of hæmorrhage rather exerts a favorable influence on the subsequent progress of the disease. Indeed, the mortality among the cases under the Professor's care in which hæmorrhage took place, was on the whole lower than among those which did not show this complication. This Prof. Maragliano brings forward as an argument in favor of his contention that bleeding is never injurious in infectious diseases, in spite of what may be said to the contrary, a certain quantity of the specific virus being thus removed from the organism.

In respect of the alleged influence of cold baths in increasing the liability to enterorrhagia in typhoid fever, Prof. Maragliano has found from experience that intestinal hæmorrhage is of less frequent occurrence in cases of enteric fever which are treated by Brand's method than in others. Patients who suffer from hæmorrhage are usually those in whom the treatment has been commenced too late, as, for example, those who are taken to the hospital when the disease is already far advanced.

The following is the method of treatment recommended by Prof. Maragliano in cases of enterorrhagia in the course of an attack of typhoid fever: The physician should remain by the side of the patient until all signs of hæmorrhage have disappeared. An ice-bag is to be applied to the abdomen especially over the right iliac fossa which is the seat of the hæmorrhage. A hypodermic injection of one gramme (fifteen minims) of ergotine is at once to be made. From four to five