

sion, that nothing is wanted to correct the danger of over-population but improvement of mental process; nearer communion with the Eternal Mind in His works; purer artistic education, healthier homes, more rational amusements, and the ennobling influence of a holier life amongst those who assume to be the cynosures of the nation.' Then treating, finally, of the future of sanitary science in relation to social life generally, Dr. Richardson dwelt on the importance of teaching sanitary science 'so as to carry the sympathies of the learner and his more refined tastes along with his reason, so as to attract and charm his senses as well as his intellect.' He declared his desire strongly to enforce that 'it is the section of the nation which Dr. Farr classes as the domestic, the six million of women of the nation, on whom full sanitary light requires first to fall.' Health in the home, he said is health everywhere. Elsewhere it has no abiding-place; and the woman is the presiding genius of the home. And the address closed with an eloquent expression of the surpassing value of the help sanitarians will obtain if they can win the matchless generosity of women, and 'their overpowering love for every device tending to promote the happiness of all things of life,' to the cause of sanitary science.

CROUP CAUSED BY MIASMA.

Dr. Lewis S. Pilcher has recently made a valuable report to the Kings County (Brooklyn, N.Y.) Medical Society on the subject of croup, published in "The Proceedings" of that Society, April, 1877. Dr. Pilcher has studied that disease with much care with reference to local conditions. A map of Brooklyn accompanies the report, on which the dwellings wherein cases of the disease have been met with are suitably indicated. It needs but a glance at the map to perceive just where the malady has been most prevalent, and to enable deductions as to the probable influence of the soil, drainage, etc., on its persistence to be readily made.

Under the term 'croup,' Dr. Pilcher includes 'all forms of acute inflammatory affections of the larynx or trachea which may produce narrowing of their caliber to such an extent as to occasion serious prolonged dyspnœa.' This embraces three conditions, namely, catarrhal croup, membranous croup, and diphtheritic croup. The first two differ in the secretion, in the former case being liquid, and in the latter its giving rise to a false membrane of varying thickness. Diphtheritic croup differs only from membranous croup in being recognized as a part of a general diphtheritic infection. Exposure to cold produces catarrhal croup; but membranous croup demands for its production not only cold and moisture, but also a miasmatic poison, the character of which is allied to that which is active in diphtheria.

The conditions under which the author has found that the worst forms of croup may be generated are abundantly prevalent in some parts of Brooklyn. The disease runs riot among the large numbers of badly nourished and weakly children in the thickly populated