anchylosis of the joint can no longer be maintained in the face of continued experience with arthrectomy in furnishing improved functional results-i.z., limbs of equal length and moveable joints. The average length of time in hospital, in 18 cases reported by S., was 45 days, showing a considerable advantage in this respect over the older operation of typical Four of these cases have resection. passed the third year following the operation and no recurrence has taken place; the remaining 14 are of more recent date. In one case secondary amputation was necessary, and in another the result was unsatisfactory because of a previous paresis of the extremity. With these exceptions the results, both as regards rapidity of healing with fistulous tracks, comparative length of the limbs, and normal or almost normal movements of the joint, were entirely satisfactory.

It may be said that S. insists that every case must be submitted to early operation; but a few weeks of continued non-operative treatment are allowed to elapse before arthrectomy is resorted to By this early interference the usual cause of shortening, namely, the invasion of the epiphysis, either by the disease or the surgeon's knife is avoided.

The operative technique and aftertreatment of S. consists in, 1st.—The employment of long lateral incisions into the joint in order to obtain access to the synovial sac, avoiding interference with the flexion and extension apparatus attached to the joint, in order that early movements of the parts may be carried on. 2nd.—In case of primary union the patient is directed before the end of the first week to make slight attempts at moving the knee joint, the dressings being lightly applied for the purpose. The greatest stress is laid upon the necessity of insisting upon the extension movements being properly performed; those of flexion follow naturally in the course of time.

Ponade for Chapped Hands.—Landin, 100 gm.; paraffin oil, 10 gm.; vanillin, 0·1 gm; oil of rose 1 drop. Apply morning and evening.—Rev. Ther. Med.

## SUMMERDIARRHŒAOFINFANTS

BY H. H. CHOWN, M.D., C.M., WINNIPEG.

The subject of infantile diarrhea is one of special interest at this time of year because of its frequency. Though every practitioner has dealt with many cases, yet there is no generally accepted plan of managing the disease, and the long list of deaths ascribed to it each summer shows the want of a successful line of treatment.

Various medicinal agents have been lauded as curative and extensive trials have been made with many of them, but so far bitter experience has only shown each and all to be futile. That drugs may sometimes be useful one cannot doubt, but that the dietic treatment of these cases is, at present, more important than the medicinal is in my firm belief. Unfortunately the cause of the disease is not yet elucidated and we cannot, therefore, gather suggestions from its etiology. Occurring so frequently during the hottest part of the year, some have ascribed it to the overheating of the child's body. With the delicately adjusted heat-controlling powers of the human system, it is impossible for heat to be the one factor in the case. If high temperature of the atmosphere is to be accepted as an agent, it can only be secondarily by its deleterious effect on the child's food. The greater prevalence of the disease in thickly inhabited places and among bottle-fed babies, may be accounted for partially if not wholly, by the influence of heat in aiding in the more rapid deteoration of food products, and especially of that universal baby's food, milk.

The arguments from analogy in favor of a bacterial origin of the disease are both numerous and cogent, but we have not yet found the particular microbe which causes such sad havoc. Until we isolate the germ, if such there be, the subject must remain a quaestic rexata. The greater number of drugs so far suggested for use in this disease belong to the class of germicidal agents, showing the strong hold that the microbic theory of origin has upon the general profession. Still it remains true that we have no agent which