

Another less expensive artificial human milk may be prepared by mixing one-quarter pint of cream with three-quarters pint of warm water, and adding one-half ounce of milk sugar. To this, two to ten ounces or more of milk may be added, according to the age or the infant's capacity for the digestion of curd.

Another artificial human milk may be prepared according to Meig's formula, by taking two table-spoonfuls of cream of medium quality, one of milk, two of lime-water, and three of water to which sugar of milk has been added in the proportion of seventeen

and three-quarters drachms to the pint, which saccharine solution must be kept in a cool place, and prepared fresh every day or two. An infant may take from half a pint to three pints of this mixture, according to age. In round numbers this artificial human milk may be said to contain eleven to twelve per cent of solids, of which three or four per cent is fat, one per cent curd, and six to seven per cent sugar.

Any one of the above forms of food will generally be found to agree well with a healthy infant, or when it is suffering from dyspepsia or intestinal catarrh.

THE DISTRIBUTION OF CONSUMPTION.

CONSUMPTION is so common a disease and so fatal that too much cannot be written in relation to it and its prevention. The following, from the British Medical Journal, from a paper by the Registrar General of Ireland, Dr. Grimshaw, read at the meeting of the Academy of Medicine in Ireland, in May, with the discussion upon it, will be found of much interest.

Dr. Grimshaw analysed a large number of tables and exhibited maps illustrating the distribution of lung diseases in Ireland, and compared the rate of mortality with those from similar diseases in foreign cities, England, and the antipodal colonies of Great Britain. The main conclusions arrived at by Dr. Grimshaw, were that the less civilised portion of the population of Ireland were less effected by phthisis and lung disease than the more civilised portion of the community; that not only was phthisis more prevalent among urban than among rural populations, but that essentially rural populations near large towns suffer more than those in remote

districts, thus pointing to infection as a means of spreading the disease. Comparing the distribution of phthisis with the physical configuration of the country it was found that, as elsewhere, the low levels suffered more than the high levels. The bogs did not seem to specially favor the prevalence of phthisis; indeed, they seemed rather to counteract the disease. There was no constant relation between the prevalence of phthisis and other forms of disease of the respiratory organs. In many cases there was an absolute contrast between the prevalence of phthisis and the other forms of lung-disease. A map showing the more elevated portions of the country, when compared with a map showing the distribution of phthisis showed that disease to prevail most in the less elevated portions of Ireland. There did not appear to be a close relation between the general distribution of the geological formation and the prevalence of either phthisis or other forms of lung-disease, except in so far as geological formation