

mouth. The plugging of the nostril causes the patient to breathe entirely through the mouth, thus increasing the tendency to fissures of the tongue and lips. Sordes in the posterior nares may produce inflammation of the throat, which may extend to the Eustachian tubes, and the unclean nose may thus be the primary cause of otitis media. Or the sordes may be carried in particles by the breathing down into the bronchial tubes and lungs, inducing irritation of these organs, which may result in bronchitis, or pneumonia of more or less septic type.

The accumulation of sordes can be readily detected by the dry, whistling breathing. Take a pledget of absorbent cotton saturated with a five per cent. solution of boric acid; press the pledget well back into the nares; do this several times to soften the sordes, then use the dull end of a hair-pin or a dull curette to remove the mass. Spray the nostrils with listerine or Seiler's solution.

In cleansing either nose or mouth great care must be taken not to cause bleeding, for the abraded mucous membrane may be a source of reinfection. In this connection it might be well to mention that in addition to the usual hygiene of the mouth it should always be cleaned after taking milk, since milk forms a particularly favorable culture-medium for bacteria, which may then be carried to the stomach, exciting indigestion and flatulence. Thompson says that a tongue-bath may often be used to advantage—that is, to hold the mouth full of fluid for several minutes at a time, when such moisture is absorbed by the mucous membrane.

Attend to the nose and mouth carefully, and you will avoid one important source of complications and add greatly to the comfort of the patient.

For the tenacious mucus give a teaspoonful of equal parts of glycerine and lemon-juice, or a teaspoonful of glycerine and borax mixture. Any alkali assists in dissolving the mucus. The same relieves the disease from the hard, tenacious mucus in pneumonia.

Whatever means are employed for bringing down a temperature, let the patient regard the process with pleasure, and not with dread.

In private practice sponging and the pack are chiefly relied upon. Endeavor to be an artist in sponging. Know *why* you sponge. Remember that the primary object is not the sudden reduction of temperature, but the indirect control of it by the soothing of the nerve-centres. However limited the time for giving a sponge, never appear to be in a hurry. Have everything in readiness before removing the night-dress. Make long, firm, straight, downward strokes, paying particular attention to the large blood-vessels and to the spine. If you have half an