

REMOVAL OF INTUBATION TUBES.—Dr. Dillon Brown showed, on May 27th, 1895, at the meeting of the American Pediatric Society, at Hot Springs, Va., an invention of his own for the removal of intubation tubes. It is simple and works easily even in the hand of one who is not a specialist. It consists of a hook on a ring which fits the index finger. The tube is provided with a wire handle or bail on which the hook catches, when by raising the finger the tube is removed. The device is so simple that it seems likely to be of universal service.

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INTESTINAL DISEASES OF CHILDREN.—In a paper on "Gastro-Intestinal Diseases of Children," in the *Medical Record*, Dr. Phenix emphasizes the necessity of refraining from administering starchy or saccharine foods to young children. Regulation of the hygiene and diet should be strenuously enforced. The mother's milk should always, if possible, be given. If observance of the above rules is not sufficient in ordinary infantile diarrhœa, he suggests remedies to combat fermentation and putrefaction—hydrochloric acid with pepsin, sulphite of soda and small doses of calomel.

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RHUS TOXICODENDRON.—Poison ivy, found on this continent in many places, from Canada to Georgia, all parts of the plant, especially the leaves, when brought in contact with the human skin, produce in most persons a redness, itching, swelling and vesication, erysipela-toid in character. Amongst the numerous remedies which have been employed for the relief of the distressing symptoms, the most efficient are: Lotio plumbi and spts. æth. nitrosi, equal parts, applied locally; Lotio plumbi lactatis. Pulv. ipecac, one drachm to the pint of water; Fresh leaves from the bean bruised; internally, salines and diuretics.

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HOW LONG SHALL THE PUERPERANT MAINTAIN THE RECUMBENT POSITION?—Dr. T. R. Barker (*New York Medical Journal*, July 6th), in a short article gives his reasons for differing somewhat from the teachings that generally prevail that the puerperant should keep the recumbent position for at least eight or ten days. He strongly advocates proper physical and mental rest, but thinks that if the patient is doing well she need not keep the recumbent position rigidly after the fourth day. When this liberty is accorded her she will not be so restless, and the bed is not so irksome. Sleep at night will be better, and the bowels and bladder act more freely. The lochia escapes more freely, which is a great boon to the patient. With regard to getting out of bed he differs again from the usual custom. He advises primiparæ to remain in bed three weeks, and multiparæ, two weeks.