

Acid digestion, gastic catarrh, and flatulency, are the leading forms of dyspepsia of the aged. Old people have not in general what we call a healthy appetite. One well-known writer has said that they eat because no other interesting occupation is offered their senses. This may be true for the *very* aged, and it is undoubtedly a fact that most people of eighty years and upward find as much pleasure in eating as in almost any other occupation left them. The appetite is often lost when no disease can be detected. There is loss of the sense of taste, and even several days without food does not provoke hunger. In another form, the breath is somewhat offensive, the tongue furred, when in the former case it is clean.

Fisher tells us that, if this continues, it leads to senile marasmus or atrophy of the aged. Some old people suffer from a difficulty in swallowing, which seems to be the result of a partial paralysis of the throat; the pharynx does not respond to the stimulus of food as it passes over it. Solids pass more freely than liquids. Deglutition is more difficult in an upright than in a horizontal position. Fisher speaks of the case of a man sixty years of age who swallowed soft and mucilaginous preparations with difficulty, but warm food, salty or irritating substances gave little trouble. Day has noticed the same fact, and observes that irritating or highly seasoned foods were the only ones swallowed easily. Canstatt thinks that the abuse of tea and coffee leads to the development of this state, which he says is very common in Holland.

Old people are subject to accumulations of gas in the intestinal tract, which not only occasion distress through over-distention of the stomach, causing pressure upward upon the diaphragm, and consequent interference with the heart's action, especially when lying down, but also from its passage downward into the bowels.

Diarrhoea is one of the consequences of dyspepsia, and it is not unusual to find old people who have several movements of the bowels daily, without any of the exhaustion attendant upon ordinary diarrhoeas. Another remarkable fact is, that we find, even in very old people, a diarrhoea which would naturally seem to weaken and prostrate even a strong man, but the effects of which are not noticed until suddenly we learn that death has taken place. Overfeeding is a frequent cause of these senile diarrhoeas. The pres-

sure of undigested food in the intestinal canal is followed by a sudden purging, without pain, but exceedingly rebellious and difficult to conquer. Before treating of the methods of cure for dyspepsia and its accompaniments, such as loss of appetite, difficulty in swallowing, flatulence, constipation, etc., there remains to be studied the foods suitable for old people, the quantity to be eaten, and the time for eating.

It would be useless to present a dietary list to which one should be strictly confined. A long life of indulgence in eating and drinking, as well as diversity of taste, would preclude any attempt at regulating the diet of healthy elderly people. To those who have arrived at an advanced age without any form of indigestion, I would suggest a cup of coffee and a slice of dry toast before rising in the morning. The reason this should be served while one is yet in bed is, that very old people, even when perfectly well, are often subject to a slight faintness and a nervous tremour before rising, and the exertion necessary to dress often leaves them too faint to eat. It takes but a few moments to prepare it, and, as old people like to rise early, it is usually an hour or two before the family are prepared for the morning meal.

A light luncheon at noon, and dinner not later than five or six o'clock. If the dinner is taken at noon, and supper at six o'clock, it will be found to suit the habits of the aged better in one way, as old people love to retire early. In most countries, among civilized nations, the practice of crowding three meals into the twelve hours or more of daylight has grown to be such a habit that it seems a heresy to suggest eating when hungry, day or night; nevertheless, I would suggest to the healthy and not *too* aged person to forfeit the "bugbear" of "not eating before retiring," which compels many a person—otherwise disposed—to pass ten or twelve hours with the stomach in a collapsed condition, while during the other twelve it is constantly distended with food. I would say to the aged, eat sparingly and eat frequently. Let your food be light, and easily digestible, but eat when hungry, whether it be twelve o'clock at noon or twelve o'clock at night. Aged people are light sleepers, and often wake up during the night with an intense craving for food, and a good plan is to have a cup of bouillon and a cracker on a stand near the bed. The broth can be readily heated by an alcohol lamp in five minutes.