

easy bruised feeling, which is often complained of after the kneading, and in irritable subjects is apt to induce restlessness and insomnia.

Galvanic excitement of contraction in the paralyzed muscles is often decidedly useful; but it is a measure which requires to be employed with moderation and at intervals of about twenty-four hours. If resorted to too early, or too freely, it exhausts the nervous power of the affected muscles.

DOG'S MILK IN RICKETS.

The *Gazette Hebdomadaire* states that it is the custom among the women of Montrun, in Dauphiné, to continue suckling for two years and a half to three years, with the idea of preventing another pregnancy; and if the infant dies, the mother either adopts another, or takes a puppy into her family to carry on the process. All these puppies suffer from rickets, which resembles exactly the rickets of children, except that the deformity is never afterward remedied. These observations, and the fact that the dogs always recovered under the influence of their own mothers' milk, induced M. Bernard to submit a rickety female child of twenty-six months to the dog's-milk cure. A powerful bitch was provided to act as wet-nurse for the child, and after from two or three months of this method of imbibing nourishment, the swelling of the epiphyses and the bending of the bones had notably diminished, the muscles were stronger, and at the end of the time the child could stand and take a few steps. The health of the patient was, at the end of one hundred days, extremely good; a slight curve of the femur and sternum being the only remains of the deformity, and the cure was permanent. He has adopted the treatment successfully in six other cases, and he expresses the belief that it will give encouraging results.

REMARKS ON APOPLEXY.

In a lecture on Cerebral Hemorrhage, in the *British Medical Journal*, Dr. Julius Althaus remarks:—

Among the various points which influence the issue of such attacks as just described, the age of the patient is a most important one. Clinical experience has shown that the young recover more easily from the complaint than the old; and the result of my researches on the mortality from this disease in England and Wales during the last forty years, enable us to give considerable precision to this point. A large number of infants die of apoplexy in the first year of age; but these are mostly cases of meningeal, and not of cerebral hemorrhage. Of the latter there are hardly any instances between the first and fifteenth year of life; after fifteen they are "few and far between"; but at thirty-five there

is a perceptible increase, and the numbers then gradually swell, until they reach an immense maximum, between seventy and seventy-five years of age. Between seventy-five and eighty the mortality from this complaint is still very large, while after eighty a rapid fall sets in; but, considering how few people are still alive at eighty and the subsequent periods of life, the fatality of cerebral hemorrhage does actually increase rather than diminish as age advances. I am, therefore, able to state in general terms that cerebral hemorrhage is of slight significance up to thirty years of age; that its fatality increases *pari passu* with years; and that *the greater the age the less is the probability of recovery from cerebral hemorrhage.*

While, therefore, age must, in every individual case of this kind which may come under your observation, largely influence your opinion about the patient's prospects, you should know that sex has no influence at all. It is true that it has hitherto been generally assumed that males are more liable to die of apoplexy than females; but my investigations of this point have conclusively shown that such is not the case; that the sexes die in almost equal proportions of the disease; and that the slight excess which is found to exist is for women and not for men, the proportion in two hundred thousand consecutive cases being 1000 for males to 1009 for females. From this you will perceive that for the purpose of prognosis sex is devoid of practical importance.

The constitutional condition of the patient has, on the contrary, a most important bearing on prognosis. Where cerebral hemorrhage occurs from leukaemia or contracted granular kidney, the prognosis is unfavorable. Gout and syphilis are likewise undesirable complications, while the absence of constitutional faults will, *ceteris paribus*, render the patient's prospects more hopeful.

Finally, treatment may incline the balance towards recovery or death. The treatment by venesection, which was formerly much in favor, was thoroughly irrational, and generally followed by disastrous results; indeed, many patients have died of the remedy rather than of the disease. Venesection has lately fallen into disuse; but the condition of the brain during cerebral hemorrhage is not one of congestion, as was formerly believed, but of anæmia; the organ not only loses blood largely, but is also, from compression of its arterioles through the clot, unable to receive a fresh supply of the reviving fluid; death in this disease takes place chiefly from anæmia; and, by resorting to phlebotomy, you simply increase cerebral anæmia still further, and thereby hasten the fatal result. *Escherich the lancet, therefore, as a deadly instrument in these cases.*

A simply expectant plan of treatment is recommended by the most recent writers on the