

hand, whereby air is introduced—a fertile source of foetid discharge. As to hemorrhage I do not consider it is ever traceable to the retained membrane, but to the imperfect contraction, which is the very cause of the membrane not being expelled.”

Prophylactic antiseptic treatment of ophthalmia neonatorum is never adopted until the disease is actually manifest. Both eyes, even though only one shows symptoms, are then treated with nitrate of silver solution, eight grains to one ounce, pieces of lint dipped in cold water being kept constantly on the affected eye or eyes. When only one eye is affected it is well to have the other bandaged up so as to prevent contamination. The number of cases for the three years was .99 per cent., say one in 100, which is very low.

Infantile asphyxia is treated by Schultze's plan. First the finger is passed into the child's mouth, and the mucus removed as far as possible. The child is then placed on its back, and the operator's hands are put under its back so that they lie at each side of the spine, the fingers in the direction of the child's lower extremities, and its head resting, or partially resting, between the ulnar sides of the operator's hands. The index fingers are then passed underneath the axillæ from behind forwards, the remaining fingers continuing to support the back. The operator now stands up, allowing the child to hang with its feet downwards. The child is now swung upwards so as to cause the legs to fall over the body, and the thorax to be compressed by the thumbs, and then after an interval the legs are swung back to the original position so that the child will be as it were in the vertical or standing position whence it is again hoisted to the second position. This movement is repeated eight or ten times, and then the child is placed in a warm bath for a few minutes, during which time any mucus that has collected in the larynx is removed by aspiration through a catheter. Care should be taken not to jerk the child during the movements, lest some of the viscera be injured.

The Incubator, Mr. Lane is satisfied, has been the means of saving the lives of many infants in the hospital, since, notwithstanding the efforts of the mothers to keep them warm, the extremi-

ties of the children sometimes become cedematous and frequently assume an almost erysipelatous appearance, feeling quite cold and accompanied with an inability to draw the breast, and marked fall of temperature; but when these children are placed in the incubator an improvement is visible in twenty-four hours, and generally after another twenty-four hours the child seems completely restored. Such children always get wine-whey.—*Medical Journal and Examiner*.

ON THE PATHOLOGY AND TREATMENT OF PERNICIOUS ANÆMIA.

Dr. Paul Sandos reports the case of a female patient, aged 31, which presented all the typical symptoms of pernicious anæmia, great pallor, extreme weakness, irregular fever, retinal apoplexy, and disturbances and irregularities of the organs of circulation and digestion.

Blaud's steel pills and pepsine with hydrochloric acid had no effect, and the condition of the patient grew worse. Appetite entirely failed, and the debility became excessive; she was no longer able to sit up in the bed, was listless and apathetic, ceased to reply, and refused any kind of nourishment. The breath was most offensive, the œdema about the ankles had increased, and the pulse rose to 120. A speedy fatal termination was apprehended. Under these circumstances Dr. Sandos resorted to washing out the stomach. Only a small quantity of curdled milk was evacuated, and the washing out was continued until the water passed off perfectly clear.

The patient immediately felt greatly relieved, and was enabled to drink small quantities of milk and beef-tea during the same day. The fever completely ceased after the first washing out the stomach, and never returned. Further washing out improved the general condition of the patient, who left the hospital perfectly well. Dr. Sandos draws from this case the following conclusions:

1. The disturbances of the digestive organs, which occur during the course of pernicious anæmia, and which hitherto were considered as merely symptoms, seem, at least in certain