

need not be treated. There are two classes of cases in which the temperature will call for treatment; in the one it runs up suddenly to a considerable height (hyperpyrexia), and in the other it continues at a high general level without much remission throughout the twenty-four hours.

Hyperpyrexia, in the strict sense, is even rarer in pneumonia than it is in rheumatic fever, but it is still more dangerous. It requires the immediate use of the cold bath, if there is to be any chance of saving life. Cold baths have been used as a routine treatment even in ordinary cases with a temperature which cannot be called abnormally high. Patients have been plunged into water almost at a freezing temperature many times each day, as long as the fever lasted, and that without the bad effects which might have been anticipated. The bath, as ordinarily administered to the adult, is attended with a good deal of fatigue, and, since the result desired can be attained in other ways, e.g., by sponging, cradling, or packing, the cold bath is reserved for exceptional cases.

*Cradling* is the simplest in practice, and is certainly very efficacious. The patient is stripped, or, at any rate, covered only with a light sheet or night-dress; a cradle is put over extending from the chin to the feet, and over this is laid a single sheet, and, if necessary, ice-bags may be hung inside. In this way the temperature may be considerably lowered and kept down.

*Wet packing* is useful when the skin is dry and pungently hot.

A *hot bath* is for children better still at a temperature of 105° to 108°, a few handfuls of mustard being mixed with the water. After being removed from the bath, the patient is laid, without being dried, between blankets; a powerful reaction soon sets in with profuse sweating, and continues for some hours, during which time the child, who has been restless before, often sleeps quietly and wakes up much refreshed. I have given such a bath to children daily in the evening, or even twice in the day, and always with the greatest benefit.

*Antipyretic drugs* have two disadvantages, the first that their action is so transient, and the second that they are so likely, when freely used, to produce faintness or collapse. For these reasons they are now but little used.

Cardiac failure is the great risk in pneumonia, and the knowledge of this fact yields two prime indications for treatment, first to counteract it when it develops, but, more important still, to avoid everything which tends to produce it or aggravate it. It is for this last reason that the old depressant treatment by repeated bleedings, full doses of antimony, aconite, veratrin, etc., has been abandoned, as well as most of the antipyretic remedies.

The causes of cardiac failure are not the same in all cases. It may be the result of previous disease, or be due to acute degeneration of the