Infantile, demonstrated that quinia acts not only in in lowering the temperature and moderating the frequency of the pulse, but in shortening the period of convalescence. It is at once, he maintained, an natipyretic and a tonic. His observations were made on children arrived at the period of second dentition. Dr. Rapmund, on the other hand, chiefly observed its effects in much younger children, some being still at the breast. He administered quinia in four cases of scarlet fever, eleven cases of measles, two cases of smallpox, three of erysipelas, nine cases of lobular pneumonia, and three of follicular enteritis. Country practitioners know very well that paients do not send for medical advice in the ordinary exanthemata unless serious symptoms appear, In such cases he speaks in terms of praise of the immedite administration of quinia. Previouly to its being given, the child has often been in his practice excited, sleepless, delirious, and the cause of great alarm to the relatives. But as soon as a sufficient dose had been taken, the temperature and the frequency of the pulse fell, and the children enjoyed a calm and prolonged sleep. This hypnotic effect is of the greatest importance in children, enabling them to recover their powers during repose. Its value has been particularly insisted upon by Profession Jurgensen in respect to the treatment of croupal pneumonia. Quinia has also a marked influence in rendering the march of febrile diseases benign. Vogel, in the *Dictionnaire des Maladies de l'Enfance*, has recently declared that quinia is the only remedy that has succeeded in his hands in erratic erysipelas; and Dr. Rapmund has been equally succesful. The dose was about two or three grains per diem. The strength of the patient must be kept up, especially when the erysipelas spreads. The affection in which quinia is serviceable *par excellence* is the lobular pneumonia of infants, and Dr. Rapmund prides himself on having obtained seven successes out of nine cases. In this disease death supervenes in consequence of cardiac insufficiency due to the violence of the fever, and it is obvious that quinia is exactly adapted to conteract this condition. When the extremities are pale and cold and cyanosis has set in, quinia is useless; but in a less advanced stage, when the febrile symptoms are acute and the temperture and pulse are much above the normal, quinia is formally indicated, and under its influence not only does the fever diminish, but the thoracic symptoms improve. The number of respirations, which often rise to eighty per minute, falls to thirty or less; the nostrils cease to dilate, the contractions of the diaphragm become less painful, and the child becomes calm. In cases of hooping-cough quinia appears to diminish the violence of the attack, and better rest is obtained at nigkt: and it appears to prevent complications, and to render the course of the disease much more uniform and benign. Children should be well supported either by means of milk or by beef-tea. In very feeble infants, small quantities of wine may be administered. In regard to follicular enteritis, careful treatment with a wet nurse is essential, and quinia is a valuable adjuvant. When from any cause quinia cannot be taken by the mouth, it may advantageously be administered in the form of a clyster. Dr. Rapmund prefers the hydrochlorate of quinia, and its intence bitterness may be to somo extent concealed by the addition of a little glycerin to the mixture. The flavour is also masked by its boing dissolved in coffee.—*Practitioner*, Aug. 1874.

TREATMENT OF TYPHOID FEVER BY COLD.

Dr. F. T. Roberts, Assistant Physician and Teacher of Clinical Medicine in University College Hospital, gives (*Practitioner*, January, 1875) the following as the conclusions which he has arrived at with respect to the treatment of typhoid fever by cold.

"1. It is highly desirable that the members of our profession should be more generally impressed than they are at present with the usefulness of the various modes of applying cold to the surface of the body in febrile cases, under certain circumstances; and that they should be prepared without hesitation to carry one or other of them out efficiently whenever this plan of treatment is indicated. This applies to typhoid in common with other fevers.

"2. On the other hand, to adopt a routine hydropathic treatment of any fever seems to me most objectionable, and this applies especially to the more severe methods which are advocated. As already remarked, they are not easily carried out in general practice; they are certainly not required in a large proportion of cases; most of them are anything but pleasant to the patients, and they may prove very trying and exhausting, especially if frequently repeated, as they usually need to be if the treatment is efficiently fulfilled; while it must be remembered that they are not harmless measures, but may have a powerful influence for evil as well as for good. With regard to typhoid, many cases do not come under observation until it is too late to attempt to check the primary fever, even supposing that the intestinal lesion could be thus limited. For these and other reasons I do not see that, at present at least, a hydropathic treatment of typhoid fever in general practice has any claim to our support. If it is thought worthy of trial it ought first to be fairly tested in *bonâ fide* cases of this disease, and under the strictest and most competent supervision. With regard to sponging of the skin, I believe that this is often very useful, and ought to be employed far more requently than it is at present, in typhoid as well as in ther fevers. With proper care it does no harm, while it often gives much relief, and is beneficial in other respects.

"3. The cases in which the more severe methods of applying cold are indicated are those in which the temperature is already very high and remains so, or shows a tendency to rise rapidly, especially if at the same time there are signs of much nervous disturbance. Unquestionably this plan of treatment is not resorted to under these circumstances nearly so frequently as it ought to be. It is difficult to lay down any exact rule as to what tempera-