TREATMENT OF BRONCHO-PNEUMONIA IN CHILDREN WITH APPLICATION OF ICE.

Dr. Angel Money, Assistant Physician to University College Hospital, London, in a communication to the *Lancet*, says that he has treated many cases of severe broncho-pneumonia in infants and children with applications of ice-bags. The cause of the pneumonia does not, in his experience, influence the employment of the ice-bags. It may be used with much success even in cases of broncho-pneumonia secondary to tracheotomy, but still more favorably in cases occurring in influenza and measles. The smaller the child, the more marked, he says, are it effects. In very small infants, under one year of age, the ice-bag may be placed on the head, the hair having been previously thinned and shortened if necessary. The treatment, to be successful, must be carried out with a will, and systematically. As a general rule, the temperature in the rectum affords the best guide to the application of cold, and those acquainted with broncho-pneumonia well know the highly-marked remittent or also of intermittent character of these affections. Ice-bags have the objection that they often give rise to a little wetting of the child; but this has not, in his experience, proved injurous to the patient. Leiter's tubes have been tried, and have some advantages, being especially valuable when an intelligent nurse is in attendance. In severe cases, in which a rapid effect is required, two ice-bags have been placed on the head and one over the chief seat of consolidation in the lungs. With a little management, he says, it is not difficult to keep these in place; certainly not when the neuro-muscular prostration is marked, as it almost always is in severe cases. The chief merits of this treatment, he says, consist in the maintenance of the strength not only of the heart, but also of the respiratory centres and of the nervous and muscular systems. Although otitis media occasionally occurred, yet this has has not been more frequent than in cases treated without cold. Albuminuria, he says, is not rendered worse by the cold, nor have any cases of hæmaturia been observed, although Dr. Money has been at some trouble specially to collect and test the urine. The duration of the disease he declares to be, on the whole, shortened. Convalescence is almost invariably rendered more rapid, doubtless because of the conservation of the child's energy.

Not only, he says, does the cold directly quiet the heart and and steady the circulation, but the calming of the nervous system also acts indirectly in the same direction. The respiratory centres are similarly beneficially affected. The heat-regulating apparatus manifests more clearly the same beneficient action, and the temperature-chart shows a similar harmonious effect. It is curious to observe the almost immediate cooling of the whole surface of the body soon after the application of ice to any part, this cooling effect being best marked when the ice is applied to the head; the hands previously red and hot, become cool and slightly blue. The change is decidedly favorable, notwithstanding the supervention of the signs of feeble circulation in the exposed parts of the skin. Vomiting and diarrhœa, alone or in combination, may require treatment in the cases under consideration; the cold method, he says, does not increase diarrhœa, but certainly tends to stave off vomiting. Stimulants are to be used when indicated, but they are less apt to be necessary under this treatment. There is, he says, a saving of expense all around: the cost of the illness is lessened and there is less expenditure of reserve strength.—*Med. and Sury. Rep.*

THE TREATMENT OF VALVULAR AFFECTIONS OF THE HEART.

Dr. J. M. DaCosta, of Philadelphia, read a paper with this title, in which he showed that not a study of the valvular conditions, but a clinical observation of the effects of various medicines, was at the root of the matter in successful treatment. When compensation was good no drugs were to be given. If the heart was overforceful, sedatives were of value, and when the heart action tended to fail, small doses of digitalis might prolong life for years. The same valvular affection in different cases called for different treatment. He had seen cases in which aconite gave marked relief where digitalis could not be endured at all and made the condition worse.

As for dosage, he had usually found the best effects from digitalis when given in ten-drop doses twice a day; but some patients did better on ten drops of the tincture once a day; and a few did best on five drops every four to six hours. If the stomach became deranged the drug might be given by suppository. Where there was dilatation of the heart, much larger doses were needed, and it was well to alternate with alcohol and strychnine. When compensation failed, the pulse became rapid and compressible, and œdema appeared, large doses of digitalis, such as fifteen minims of the tincture every hour, were needed, aided by ammonia and brandy. In aortic regurgitation, digitalis was useful if the heart-fiber was sound; but if it was degenerated, arsenic and strychnine gave better results. There were cases of aortic narrowing or regurgitation where compensation was complete, and here no uneasiness was felt. In such cases the patient merely needed to be warned not to undergo sudden strain and to lead a temperate