

the foods for the relief of constipation in infants; but glucose or grape sugar is only feebly laxative, probably not more than cane sugar. The laxative effect of oatmeal gruel for nursing infants is well known. Bread or pudding from coarsely ground or unbolted flour or meal and vegetables which contain saline and fibrous substances have a stimulating and laxative effect on the surface of the intestines, and therefore are useful for constipated children of the age of two or three years and upward. There can be no doubt that the free use of water in the ingesta materially aids in relieving costiveness; and it is probable that the laxative effect of the broths, gruels, fruits, and mineral water are partly due to the amount of water which they contain. A liberal quantity of water has doubtless a laxative effect in children, and its judicious use is proper for them.

Frequent kneading of the abdomen is an important aid to overcoming constipation, and the author relates a case in which obstinate constipation occurring in a child of three years, from peritoneal bands and adhesions, was to a great extent corrected by friction over the abdomen, for three or four minutes at a time, with cod-liver oil three or four times daily. The manipulation probably did the good, and not the oil; but the use of one of the oils for inunction renders the kneading less painful, and insures its more thorough performance by the nurse.

Cold-water bathing, the sudden application of a cloth wrung out of cold water to the abdomen, and in certain obstinate cases even the douche may be used to stimulate the muscular coat of the intestines and the abdominal muscles to a greater activity.

For temporary constipation and for many cases that are habitual, enemata should be employed.

The belief that the frequent use of warm clysters produces a relaxing effect is probably correct, so that if it is necessary to employ clysters often in consequence of the torpid state of the intestines, cool water is preferable. For infants a clyster of one or two ounces generally suffices. In certain long-continued aggravated cases the frequent injection of a large quantity of tepid water is indispensable, and perhaps in extreme cases the dilatation of the sphincter ani and the introduction of the speculum may be desirable. Suppositories may be sometimes usefully employed in place of enemata, Cocoa-nut butter, molasses candy, or soap cut in shape of a pencil may be used for this purpose. Dr. Nagel speaks highly of a suppository of brown gelatine. This is steeped in water for twelve hours, and having been thus softened is introduced into the rectum, and an evacuation obtained. The doctor attributes the laxative effect to the hygro-metric action of the gelatine. Those who have employed the galvanic current to relieve constipation speak favorably of its use.

The ordinary purgatives should not be given habitually to relieve a constipated habit. One or two doses for present relief, both in habitual or temporary constipation, are sometimes required,

provided that an injection is for any reason not preferred. For this purpose castor-oil or a few grains of calomel mixed with syrup of rhubarb, the syrup of senna, or the compound licorice powder of the German pharmacopœia may be administered with advantage. But for habitual constipation the ordinary purgative medicines should be discarded.

Belladonna, so highly recommended by Trouseau, has not seemed to the author to possess any decided purgative effect; and from its known physiological properties there is no evidence of its increasing the intestinal secretions or the action of muscular fibres, one or the other of which results we expect from the use of an agent which is really laxative. Nux vomica and strychnia, its active principle, are, on the other hand, valuable adjuncts to purgative mixtures.

Physicians are not infrequently at a loss what to prescribe for the habitual constipation of nursing infants, which is by no means infrequent. But recollecting that the colostrum is more laxative than ordinary milk, and that it differs from it in containing more sugar, salts (largely phosphates), and butter, we have a hint as to what is probably lacking in milk, and what, therefore, should be supplied.

Dr. Smith is in the habit of giving these ingredients in the following formula, and usually with the desired laxative effect:—

R. Ol. morrhue two parts
Aq. calcis,
Syr. calcis lactophosphat. aa one part. M

One-quarter, one-third, or one-half teaspoonful may be given with each nursing, or a larger quantity, as a teaspoonful or more, three times daily. Breast milk with this addition becomes more nearly like colostrum in its laxative properties, while it does not possess those properties of colostrum which disturb the digestive process. The author knows of no agent of a medicinal nature which meets the indication so well as this for infantile constipation.

He has found it necessary, however, in his practice in not a few instances to rely mainly on simple enemata for the relief of the constipated habit till the infants reached the age where a mixed diet was proper.

For the habitual constipation of older children, when it is desirable to employ active purgatives of the pharmacopœia, since the portion of intestine which is chiefly implicated is the colon, such should be selected as produce little or no irritation of the long tract of the small intestines, while they simulate the function of the colon. The aloetic preparations are preferable for this purpose, as the tincture of aloes and myrrh, or the simple tincture of aloes, which may be given in doses of a part of a teaspoonful in a convenient syrup, as the elixir adjuvans of Caswell and Hazard, or in coffee or milk.