The suitability of the clothing must, of course, be seen to; its quantity is not, as a rule, at fault, but rather its distribution. In this respect old traditions as to hardening the skins of children die slowly, and the chest is not uncommonly enveloped in four or five layers of flannel, whilst the arms, 'legs and thighs are left almost entirely bare.

Last, and in many respects least, we come to drugs: A combination of bicarbonate of soda (7 grains), tincture of rhubarb (20 minims), tincture of nux vomica and spirit of chloroform (4 minims of each), may be given to a child of five years three times a day, about half an hour before meals, and if anæmia be very marked 2 grains of citrate of iron and ammonia may be added. After food. if the tongue be not much furred, one or two teaspoonfuls of maltine may be given twice a day. In the later stages, when the dyspeptic symptoms are much improved, a mixture of liquor strychninæ (2 minims), with two or three teaspoonfuls of vinum ferri citratis, is useful. Cod-liver oil is best avoided, except in the winter months and when convalescence is quite established; probably all "chemical foods" and tonic syrups are injurious, owing to the sugar they contain causing fermentation and flatulence. If the nervous symptoms, such as night-terrors, are prominent, some bromide of potassium may be given with the other drugs mentioned; but such symptoms should never be treated by nerve sedatives only.

Finally, as an additional incentive to the prompt and active treatment of these cases of chronic dyspepsia, we should remember that if long continued, it must lead to enlargement of the Peyer's patches and mesenteric glands, a condition which facilitates in the highest degree the lodgment of any tubercle bacilli which may be taken in the food, a lodgment which is still further promoted by the lowered general vitality in these cases; thus chronic gastro-enteritis becomes an important predisposing cause—first of abdominal, and eventually, perhaps, of general tuberculosis.