

In *alcoholic nervousness* or hallucinations, Prof. Da Costa prescribed gtt. xv of the fluid extract of erythroxylon, ter die, and to increase to tolerance. Also—

R—Sodii bromidi, gr. xv
Chloral, gr. x
Syrup,
Aqua, aa q.s. ad f ʒj.—M.

Sig.—As required.

For *exophthalmic goitre* in a robust and plethoric subject, Prof. Da Costa prescribed:—

R—Tinct. aconit. rad., f ʒj.
Tinct. zingiberis, f ʒj.
Syr. simplicis, f ʒj.—M.

Sig.—Ten drops three times daily, for months, to be gradually increased as the patient will bear it.

Terebene has been much prescribed of late, in various lung troubles, at the Hospital. The following is a prescription given by Prof. Da Costa for *acute bronchitis*:—

R—Terebene, f ʒij.
Mucilag. acaciæ, f ʒij.
Morphinæ sulph., gr. ½
Syrup tolu, f ʒj.—M.

Sig.—A teaspoonful every third hour.

THE DURATION OF INFECTIOUSNESS IN SCARLATINA, SMALL-POX, MEASLES, MUMPS, AND DIPHTHERIA.—There is one point I wish to raise in this discussion. We must distinguish infection from the person and that from clothes. We must know for how long infection is exhaled from the patient as well as the potency and duration of infection attaching to the cast-off *débris* of pathological processes induced by the disease. A case may be said to be first infectious and later contagious.

Infection is exhaled for a much shorter time probably than we have generally imagined. The question to determine is, for how long the pathological processes induced by the different diseases—for example, the desquamation of scarlet fever and the catarrh of measles—continue the carriers of the contagion. How long will the discharge from skin and mucous membrane bear infective properties?

I have reason to believe that personal infection, or exhaled infection, in contradistinction to infection by contact or inoculation of the disease products, has a definite duration, and that a special period of duration of this exhaled infection characterises each disease. On the other hand, many things are explained to hasten or hinder the elimination of infection with the characteristic discharges of the disease. The rules given, that scarlet fever is infectious as long as desquamation lasts, small-pox as long as every scab or scale re-

mains on the skin, diphtheria while sore-throat, or albuminuria, or discharges from mucous surface continues, are all open to question. Upon this hypothesis, we could never say when a person ceases to be infectious.

I would suggest that infection only attaches to those cast-off products of the disease when they were formed during its strictly infectious period: that, for example, the early desquamation of scarlet fever, and not the second or third peeling, is infectious; the primary albuminuria of diphtheria as well as scarlet fever, but not that which may remain for weeks or months or years afterwards. I hold that these pathological conditions and their products, induced in a characteristic way for each disease, are not any guides as to the continued infectiousness of a patient, and on this basis I would urge that a mild case is as long infectious as a severe one.

My observations make the duration of infection in the several diseases as follows: Measles, from the second day, for exactly three weeks. Small-pox, from the first day, under one month, probably three weeks. Scarlet fever, at about the fourth day, for six or seven weeks. Mumps, under three weeks. Diphtheria, under three weeks.—*Dr. Pearse in Br. Med. Jour.*

ADVICE TO YOUNG DOCTORS.—Dr. Robert Batty, in a recent address before the Atlanta Society of Medicine, thus spoke of the younger members of the profession: If you want to succeed in professional life, don't be too careful when a call comes to you to inquire into the circumstances of your patient, whether he is able to pay a good fee or not. Don't be too careful to prune closely at the outset and trim your practice into influential patients only, and all that sort of thing. Try to infuse within your own heart and soul a true spirit of benevolence, love of your kind, zeal in your profession, anxiety to relieve human suffering, and if you pursue your mission with your whole heart, with true earnestness of purpose, *somebody* will find it out, and it will not be a great while before a great many people will find it out, and they are not going to let you starve. That sort of men is too scarce to let starve. They don't starve in America. They can't be spared. If you want to be sure of your bread and meat and provender for your horse and something for the blacksmith and carriage man, take that recipe and try it awhile. I think I can say confidently, gentlemen, from the very first day that I practised medicine it has been a rule with me to give no thought for the morrow, what I should eat, wherewith I should be clothed. Consult the interests of your patients. Try and get them well in the shortest possible time and somebody will clothe and feed you and you will have an established practice and an established reputation. You will have the support and con-