

evidence certainly does not establish his contention, and will not convince. So far as weight of authority goes, he is opposed by the general opinion of the Congress at which his paper was read; by Virchow, Professor McFadyean, and certainly by the majority of clinicians in all parts of the world. The matter must still be considered one of the unsettled problems in medicine. The general interest stirred up by Koch's announcement will undoubtedly stimulate research in the matter, which is probably the greatest result that will follow on what he has said.

To jump, from Koch's opinions, to the conclusion that all the restrictions heretofore placed on the sale of the milk and meat of tuberculous animals are entirely unnecessary, and that there is no danger to be feared from the consumption of these articles, is an absurdity for which it would be unfair to hold him responsible. No doubt a little sober second thought on the part of those who expected an upheaval in the present sanitary regulations, with a repeal of the laws passed for the public protection, will convince them that, be the outcome of further investigations what they may, milk and meat from animals suffering from tuberculosis or other diseases will never be either safe or desirable for human food. Too thorough and stringent precautions can never be taken to insure that such potent carriers of infection reach the consumer in as pure and wholesome a condition as possible.

Considering the ill effect of the heat of the dog days, the medical profession can well afford to smile at the silly clap-trap in the way of editorial criticism offered by some of the lay press in reference to the alleged unnecessary precautions against tuberculosis upon which we have insisted for many years.—Editorial, *Canada Lancet*.

Enema after Abdominal Operations.

At the Boston City Hospital following abdominal sections it is seldom that cathartics of any kind are employed by the mouth. During the first twenty-four hours no attention to the unloading of the bowels is usually given. Then, no voluntary action having taken place, an enema, high into the rectum, is given, consisting of the following:

R	Epsom salts	(50% sol.
	Turpentine	
	Glycerine	aa. $\frac{3}{4}$ ii.
	Water	$\frac{3}{4}$ vi.

The injection is held in the bowel as long as possible by the patient.

It is well to anoint the inner thighs and buttocks in order to prevent irritation of the parts should they come in contact with the turpentine by mischance.—*Clinical Record*.