

It was worth keeping in mind that the affection was not confined to the night, at least, in some instances; there were exceptions, and he had seen one very recently. The boy was 10 years of age, and small for his years. This case was unfortunately lost sight of. A case of this kind was of course more serious than where the affection was confined to the night. As to the infirmity itself, the author said it required no description. The child wet the bed once, or it might be, as often as three times in the same night, and this, as all knew, constituted the complaint. There was a feature about it, however, that was worthy of notice in connection with its natural history, and that was, that it frequently intermitted—that is, the affection would suddenly cease for a period, and then return, or it would lessen in intensity for a time. When the question of treatment was discussed this point was not to be forgotten, for that might be set down to treatment, which, in reality, was but a feature in the affection itself. The treatment was divided into mechanical and medical. Amongst the former was included the plan of Sir Dominic Corrigan, which the author thought could scarcely be successful, and might possibly lead to the prepuce itself being turned into a receptacle for the urine, and in confirmation of this he mentioned a case, the particulars of which the late Sir Philip Crampton told him, where the tying a thread round the prepuce for the purpose of keeping in the urine had led to the formation of a new bladder. If any plan of this kind were now tried the author observed that the pressure should be applied at the root of the penis, and, further, it would be much easier of application nowadays than formerly, inasmuch as vulcanized india-rubber could be used, a ring of which would probably answer the purpose well. It was evident, too, that it would require medical supervision, but could, of course, be only applicable to boys. A very old plan, with the same object in view, was the strapping on a bit of bougie, so as to compress the urethra. In one case where the author tried this plan it had failed; and like the last plan it also required close watching and attention. Of the medical means employed, blisters to the sacrum must not be forgotten. There could be no doubt, the author said, this means had succeeded. Of two cases in which he had employed it, it failed in the first; but in the second it was more successful, and stopped the infirmity for four months. The patient was at this time a girl of 8 years of age, and the mother was advised to wait till she became a woman, and she was told the infirmity would cease. Strange to say, this girl was brought to the author by her mother this past week; but, though menstruation has been established, the infirmity is as bad as ever. She is now 15 years of age. Whether she will be cured remains to be seen. The regulation of the quantity of fluids taken, and the time, the author considered of much moment; and he particularly advised against the use of tea. There was one measure, too, he thought of the greatest consequence, and that was the teaching the patient, when such was

possible, the habit of retaining the water as long as possible in the day time. By this means the sensibility of the bladder was lessened, and good was effected. The author observed that this plan was opposed to the one of taking up the child at night, which, though it diminishes the unpleasant effects of the infirmity, had no tendency to cure the complaint, but, as he thought, the very contrary. To two medicines only did the author allude, hydrate of chloral being one, and belladonna the other. There was already some evidence that the former had been of service, but it was not sufficient yet to establish its value. The latter, as a whole, had proved the most valuable drug yet used, and had cured a good many cases. Of two cases in which the author gave it, it cured the first, a boy of 3½ years of age. In the second, a boy of 11, it had bettered him a good deal; but circumstances had prevented as full a trial of the drug as was desirable. In speaking of belladonna, the author adverted to the remarkable fact that children bore it in very much larger doses than adults. By gradually increasing the dose he had given it in very large quantities. It had rarely dilated the pupils, and then only for a short period. In prescribing it this point was not to be forgotten. There could be little doubt that the internal organs, especially the kidneys, were so active in childhood that the poison was very rapidly eliminated from the system. —*Dublin Medical Press.*

THE EYES AND SPECTACLES.

An old writer, living before the days of illuminating gas and kerosene, remarks that the "first sign of the need of spectacles is a tendency to bless the man who invented snuffers." In this age we should say that the first sign is to find one scolding about the publisher of his daily newspaper, who is charged with filling his columns with type growing every day more diminutive and indistinct. When a man or woman reaches the age of forty-five or fifty, it is generally found that some aid to natural vision is required. The discovery of this want is very liable not to be made soon enough, and the eyes suffer greatly in consequence. There is also a foolish pride which prevents some people from adopting spectacles after the discovery is made. There is no truth relating to vision more important, and which therefore should be more clearly understood, than this: that in every case of defective eyesight, whether it proceeds from advancing age or from congenital causes or from accident, artificial aids should be resorted to without delay. The tendency is in all, or nearly all cases towards irreparable injury, when this aid is withheld. It is true, bad or ill-adapted spectacles may and do cause injury, and so do improper medicines, or injudicious food or regimen. If proper care is used in selecting glasses, and the right ones are obtained, they strengthen vision, and the vigor of all the functions of the organs concerned in the phenomena.