

turbance and in whom the vitality was low. Acute diarrhœa was present at the onset, eight or more stools being noted a day, usually containing mucus in abundance, occasionally blood, were very offensive in odor, and vomiting was almost invariably present. Some of these cases had, before the onset of the attack which brought them to the hospital, had attacks of intestinal disturbance, but nothing which resembled the present, which was more acute and associated with marked prostration. The result of treatment in the hospital was unsatisfactory. Colon irrigation and stomach lavage were useful in so far as a reduction in the number of stools a day and cessation of vomiting were concerned, but careful regulation of diet was of little service. The temperature remained elevated in spite of purgation, and diarrhœa and vomiting, or regurgitation of food (as distinguished from vomiting) continued, but in a lessened degree. The length of stay in the hospital for these cases was short. Death claimed the vast majority. Those who recovered did so in from two to three weeks.

*Gastro-intestinal Indigestion.*—The onset was more gradual, the patient being admitted after days or weeks of patient endeavor on the part of the mother. The attack differed in no way from previous attacks some of the patients had had. The temperature in some cases was elevated, but was reduced within one or two days after admission to the wards. Purgation usually accomplished this. Diarrhœa of a chronic character was present, as was regurgitation of food. The stools were offensive, containing mucus and occasionally streaks of blood. Colon or stomach irrigation had little or no effect. Careful attention to diet only produced good results after days of careful feeding and nursing. The results were good in the majority of cases. This group includes those cases of disturbed metabolism who do not respond immediately to dietetic treatment, as do the malnutrition group, and in whom there is probably cellular change, both in the digestive glands and intestinal tract.

Malnutrition, due to improper foods, or to feedings too great or too small in amount, given too frequently. The patients suffered from occasional attacks of diarrhœa and elevation of temperature. After admission to hospital, and being placed on proper foods at proper intervals, they immediately improved and gained weight. This allowed of their discharge after a few days.

*Marasmus, Chronic Wasting from Birth.*—Either in premature children, or in full term children apparently healthy, who rapidly become as little old men and women, doomed to death,