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REST AND TRACHEOTOMY.

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The therapeutic value of rest in medical and surgical disease, now so thoroughly recognized, applies with no less force to the various diseases of the throat. There still seems to be a certain amount of doubt and indecision as to the best means of securing this end. In tonsillar inflammation, how keen is the suffering of the patient in attempting to swallow saliva or nourishment. This pain is largely the result of motion, and would at once suggest to a thoughtful practitioner the idea of rest. Perfect rest cannot be secured; modified rest can be, and yet how common it is to order a gargle. By gargling, I mean gargling in the common sense of the term, in which act the head must be thrown back, the liquid held between the anterior pillars, soft palate, and the base of the tongue, the air forced up to throw the liquid into motion, requiring a forcible expiratory effort, indicating the presence of motion and the absence of rest; when an inspiration is necessary, the head must be thrown forward, so as to prevent the passage of the liquid beyond the anterior pillars and velum, otherwise a drop of liquid would of necessity enter the larynx