

disease of the large intestine, its usual lubricating covering of mucus is absent, and any of the gummy or mucilaginous substances may in such case be introduced with advantage as a simple protection of the denuded tissue of the mucous membrane, is, to my mind, totally destitute of the support, not only of demonstration, but of probability; and so far as my individual experience may permit me to judge, has not practical support either. Poultices applied to the mucous membrane of the rectum no matter of what bland substance they be composed, are foreign and excrementitious, and give no rest to the bowel.

Alcoholic solutions, unless largely diluted with water, are liable to irritate, and therefore objectionable. Watery solutions, which leave no solid residuum, are clearly the most preferable, and of all preparations, the morphine salts in solution I think best. Where there is not very great irritability of the rectum, the much-used cocoa-butter suppository is a convenient and useful form of introducing the morphine, or other very soluble substances. The warmth of the bowel slowly melts down the mass, allowing the salt to come in contact with the bowel whose moisture dissolves it, and it is then absorbed, while the butter remains as excrement. But the simple watery solution of sulphate of morphine is the least irritating as well as the most active form of anodyne enema. Its dose by the rectum when thus introduced is rather less than by the mouth, and its action is more prompt and more effective to relieve tenesmus and irritability of the large bowel. I have often seen a single injection prevent all movement of the bowels for ten or twelve hours, in cases where the movements before it were almost incessant. Many adjuncts to this treatment will suggest themselves to any educated physician, and I therefore need not mention them here. I will add, however, that I rarely employ any other medication for the diarrhœa of infancy of this degree; and, so far as my observation enables me to judge, much of the favorable results claimed by our practitioners for their favorite prescriptions, such as minute doses of calomel, Dover's powder, ipecac, the sulphite salts, the bromine salts, and the various astringents, alkalies, and anodynes and disinfectants, is due to the coincident modification of the diet and care of the child. A diarrhœa, like that just described, of no great severity, having existed for some days, perhaps, suddenly suffers a great increase in the frequency of the movements of the bowels, nausea and vomiting come on, the skin becomes hot, the thirst is urgent, there is more or less extreme restlessness and actual or threatened convulsions. The dejections are, if possible, still more foetid, watery, and of various colors from black to yellow; they are often streaked or dotted with blood, and the fluid portions sometimes