

A fortnight afterwards I had the opportunity of making a careful examination of the blood. The corpuscles were found to be only eighteen per cent. of the normal number, while the hæmoglobin was twenty-three per cent. The corpuscles themselves were of various sizes, and formed rouleaux satisfactorily, but were soft and plastic. There was no leucocytosis. The blood appeared to make the naked eye obviously pale and watery. The urine at this time contained the merest trace of albumen, which entirely disappeared in a day or two. On examination of the eyes it was found he could not read ordinary print, and that there were large hæmorrhages into both retinae, especially on the right side. The iron was discontinued, and liquor arsenicalis was ordered in 5-minim doses thrice daily. He was ordered to remain at home, and was allowed the most generous diet.

Four days after the commencement of the arsenic he had a fit, but when I arrived he had partially recovered, and was fairly sensible, with no paresis. He volunteered the statement that he now saw a red color when looking at the light.

A week after the commencement of the arsenic (which was never increased beyond 5 minims thrice daily) there was no further bleeding from the gums. He had complained for a fortnight of a beating noise in the head, "like a steam-engine." This (in all probability the beating of own heart) ceased now to annoy him. The urine was normal but very pale. He was allowed to move about his room. His appetite was extraordinary, and, beside the most nutritious diet of strong soups, meat, etc., he took three to four pints of milk daily.

In three weeks he was able to walk half a mile without fatigue, and in a month returned to work. The corpuscles on January 16 (five weeks after the commencement of the arsenic) were seventy-six per cent. of the normal number, and the hæmoglobin sixty per cent. of the normal quantity. The hæmorrhage into the retinae had entirely disappeared, except for a slight blur on the right side. He could read small print and saw plainly. He continued the arsenic for another five weeks, and is now quite well.—*Therap. Gazette.*

THE INFLUENCE OF DIET ON THE GROWTH OF HAIR.—Several cases of shedding of hair after influenza have confirmed my opinion (E. D. Mapother, M. D.), that diet has much to do with the production and with the cure of symptomatic alopecia. Hair contains 5 per cent. of sulphur, and its ash 20 per cent. of silicon and 10 per cent. of iron and manganese. Solutions of beef, or rather, part of it, starchy mixtures, and even milk, which constitute the diet of patients with influenza and other fevers, cannot supply these elements, and atrophy at the root and falling of hair result. The colour and strength of hair in

young mammals is not attained so long as milk is their sole food. As to drugs, iron has prompt influence. The foods which most abundantly contain the above-named elements are the various albuminoids and the oat, the ash of that grain yielding 22 per cent. of silicon. With care these foods are admissible in the course of febrile diseases, when albumen is the constituent suffering most by the increased metabolism. I have often found a dietary largely composed of oatmeal and brown bread greatly promote the growth of hair, especially when the baldness was preceded by constipation and sluggish capillary circulation.

Those races of men who consume most meat are the most hirsute. Again, it is well known in the Zoological Gardens that carnivorous mammals, birds, and serpents keep their hair, feathers, or cuticle in bad condition unless fed with whole animals and the egesta contain the cuticular appendages of their prey in a digested or partly digested state. It is also an old well proven fact that a closely restricted diet, cheese for example, soon produces in dogs a loss of hair.

In treating fevers a long course of non-nitrogenous diet may promote seborrhœa, which is so often a concomitant of the alopecia. When the special nutritive supply is secure, the depressed condition of the vasomotor and trophic nerves proceeding from the cervical ganglia to the scalp may be stimulated by blisters and liniments at the back of the neck. I have always found that friction of the scalp with pomades and lotions dislodges many hairs which might otherwise remain, and that cold or tepid baths with salt added and rough rubbing of the rest of the body will flush the capillaries of the affected part more effectually. Besides, when pomades are used, frequent washing becomes necessary, and this is conducive to baldness.

PATHOLOGY OF FACIAL PARALYSIS.—Professor Minkowski, of Strassburg, has made an important contribution to this subject. Cases of Bell's paralysis are common enough, but it is not often that an opportunity occurs of examining the abnormal nerve. The clinical history of the case was the usual one. The attack came on after exposure to cold, and when the patient was last seen there was well-marked reaction of degeneration, but there were indications of commencing return of voluntary power. The patient died by misadventure, and the result of the examination of the nerve is somewhat surprising. There was no difficulty in removing the nerve, no appearance of inflammatory compression in the bony canal, and the nerve coverings were quite normal in appearance. In the peripheral branches of the nerve nearly all the fibres examined were in an advanced stage of degeneration. Here and there were newly formed nerve fibres and others in process of regeneration. In the other branches besides those degenerated