

pulse, and dilated pupils, which did not react to light. An india-rubber bag, with the oxygen gas, was procured from a near chemist in about twenty minutes. The gas was pressed out of the reservoir through a glass tube into the woman's mouth. In about four minutes, after nearly five litres of oxygen had been pumped in, the patient recovered her senses. Dr. Gautier adds that oxygen inhalations were first employed by him with similar good results in a severe case of poisoning by charcoal fumes in 1846.

UNIVERSALITY OF DIPHThERIA.—At the late Washington Congress Dr. W. Earle, of Chicago, Ill., read a paper relating to sewerage, water-pollution and diphtheria. He presented the results of a study of the causes of diphtheria in localities remote from sewer gas influence in the less thickly populated Western States and Territories. He had received communications from a large number of physicians widely scattered over this great region. His conclusions were as follows: 1. Diphtheria occurs in the mountains and prairies of the great North-West with the same malignancy as in the East. 2. And with equal virulence in vicinities remote from sewers. 3. When once introduced, the residents of damp sod houses suffer with marked severity. 4. The infection is transported thousands of miles in some unrecognized vehicle. 5. There is abundant testimony that it follows the lines of railroads and steamers, making it imperative to increase the watchfulness and improve the methods of disinfection by railroad and steamboat companies. 6. The desirability of legal enactments obliging people of all classes to recognize their responsibility in regard to the control of contagious diseases.

TWO PLUMBERS named White and Ellis were recently fined \$750.00 in New York for having done imperfect plumbing work and violated the sanitary code.

SYMPTOMS OF SEWER GAS POISONING.—Dr. Hun, of Albany, says that he has carefully studied twenty-nine cases, and thinks it probable that the following condition may result, besides the usual symptoms of specific disease: Vomiting and purging, either separately or combined:

a form of kidney trouble; debility, in some cases in which the heart is especially involved; fever, which is frequently accompanied by chills; sore throat, which is frequently of a diphtheritic character; neuralgia. These conditions may occur separately, but are frequently combined, and it is especially common for the fever to be associated with the other forms of sewer gas poisoning. Finally, in cases of sewer gas poisoning there is one group of symptoms which is almost always prominent, and these symptoms are loss of appetite, drowsiness, extreme prostration and a dull, unpleasant feeling in the head; and whenever this group of symptoms occurs, not as the result of an attack of acute disease, but as a chronic condition, a suspicion is justified that the patient is exposed to sewer gas infection.

COW SHEDS, SLAUGHTER HOUSES AND TYPHOID FEVER.—A few years ago Mr. Henry Lawrence, in a paper on 'The Genesis of Typhoid Fever,' gave his experiences of typhoid fever in South Africa, during a period of thirty years, and went far to prove there was an intimate connection between typhoid fever and the presence of the manure of horned cattle. Mr. Lawrence did not venture to advance any theory as to the nature of the connection, but, I believe, suggested that it might consist in the manure being infected from some infective process in bovine cattle, analogous to typhoid fever in the human subject. An independent observer in South Africa, Dr. James F. Allen, medical adviser to the Corporation of Pietermaritzburg, has recently presented to the Corporation a report on the causes of typhoid fever in that city. Dr. Allen endeavours to establish a connection between the incidence of typhoid fever among the inhabitants of farms, and a *specific enteritis* among young calves. A significant fact ascertained by Dr. Allen was, that the *post-mortem* appearances found in the diseased condition of the calves to which he gave the name of *specific enteritis* were almost identical with those shown in cases of typhoid fever in the human subject.

FURTHER EVIDENCE.—Dr. Brown, medical officer of health for Carlyle, gives in a recent number of the Sanitary Record, the