

little barley-water, with any effervescing or alkaline table-water, and flavored, if the patient prefer it, with a little coffee-essence, vanilla, or similar agent. Of course the peptonizing powder is most valuable. As regards the meat juices, the first resort is the old, familiar beef-tea, chicken or mutton broth. These may, if prepared in the usual way, aggravate diarrhoea. They should be made by the cold process, with hydrochloric acid, that the albumin and gelatine may be really extracted, not coagulated *in situ* by the hot water in which the meat is usually placed. They should be *consommés* as thin as water, and flavored by hanging in the fluid a little bag with such vegetables as minced carrot, parsnip, celery, sage, savory, etc., adding both flavor and vegetable juices to the dish. This may be given twice daily. There are many preparations of meat peptones, the more recent seeming to be far preferable to many of the old ones. They are familiar by name, without invidious selection, and should be tried, both for their own value and as alternatives to the wearisome milk diet. Gelatine in any form is a valuable albumin-saving agent, and any of the wine-jellies may be sparingly and tentatively used. The best is milk-jelly, peptonized milk having added to it while warm the requisite amount of gelatin, and being flavored with rum, brandy, wine, etc. It may be given cold or warm, once daily or every other day. According to some, egg may be given if uncooked, or the raw taste may be removed by breaking the egg and rapidly stirring it in a thick delft cup which has been immersed in boiling water, the heat retained in the ware being enough to lightly cook the egg. Starch in any form is undesirable. Clinical experience shows its indigestibility, and theoretically the pancreatic secretion necessary for its digestion is probably as absolutely suppressed as the saliva undoubtedly is. So that gruel, custard, etc., are inadmissible though the slight amount of soluble starch in such a fluid as barley water does no harm.

During convalescence the difficulty is much increased, especially in private practice, by the clamorous appetite of the patient. The main thing to be borne in mind is the greatly enfeebled functions of the gastro-intestinal tract, and no fast rule can be given as to the number of days of normal temperature that may elapse

before adding to the diet list. The slight elevation of temperature that accompanies the digestive process is not to be taken as an incipient relapse, but must, of course, be kept within bounds and watched. Excellent authorities set the limit at two days of normal temperature, others as much as twelve. The state of the digestive functions, as determined by the progress and severity of the acute stage, should be the guide in making up the new diet list. The first addition might be one lightly boiled or poached egg, or a custard with little starch, or a little milk-toast. If no ill results, the same the next day, with, for dinner, some chicken or other broth, thickened with well-boiled rice, not with raw starch, and perhaps, in addition, some corn starch the next day. Milk must still be given in plenty. Soon a few oysters, with the hard adductor muscle removed, may be given, then small fragments of white meat, and gradually the meats and mashed potatoes reached, not earlier than the tenth day. Before this a moderate amount of good wine or bitter ale or porter may be advantageously given, as a stimulant and digestive tonic.

ADMINISTRATION OF CHLOROFORM IN THE PRESENCE OF A NAKED FLAME.

We often hear of the dangers of administering ether, in the presence of a naked flame, because it is so highly inflammable; and, in the same connection, it is generally supposed that the use of chloroform under such circumstances is quite safe. It has been pointed out, however, by Patterson and Martin, of England, and Zweifel on the Continent, that such ideas about chloroform are incorrect. Dr. Charles Martin recently read a paper on the subject before the Queen's College Medical Society (*Birmingham Medical Review*) in which he refers to the effects of chloroform when administered half an hour or more in the presence of an open flame such as gas jets. It produces in those present a dry, spasmodic cough, becoming to some quite serious, smarting of the eyes, pungent odor with stinging sensation in the nostrils, and a sense of oppression in the chest. He has noticed that in some cases the patient's condition be-