

ON TREATING THE APPARENTLY DROWNED.

THE bathing and swimming season is at hand and so is the season of many deaths from drowning. If every man of fair intelligence were familiar with the most approved method of reviving vital action in persons who had been a dangerous time under water, many lives might be thereby saved. With the liberal dissemination of instructions on the method many persons would learn and remember the process and would employ it in emergencies. A new method which has been by medical journals pronounced superior to the long practised Sylvester or Marshall Hall method, has been recently suggested by Dr. Bowles, of London, Eng., and which has already been noticed in this JOURNAL.

After the body has been removed from the water, place it for a moment with face downward, to allow the escape of water from the mouth and throat; turn it on the side and keep it on that side continuously, except when, about fifteen times a minute, the body is to be rolled, for a few seconds, on the face again. By KEEPING THE SAME SIDE ALWAYS UP, the lung on that side becomes clear. Turning first one and then the other side up is dangerous, because thereby the partly cleared lung is suddenly flooded with fluid from the lung which was downward. It is better to clear one lung entirely than to have both half cleared. Each time the body is turned upon the face for the few seconds, a little more froth and water escapes from the mouth and nostrils. When the upper lung has been almost or partly cleared, it is useful to raise the upper arm above the head, thus drawing up and expanding the ribs and walls of the chest that air may enter, as in the Sylvester method, then bringing the arm down firmly to the side again, and repeating these arm movements fifteen or twenty times a minute; since the entrance of larger quantities of air into the lung is now safe. Pressure upon the back each time the face is turned down, assists the escape of water somewhat, and has a good

influence on the heart, aiding the propulsion of the blood toward the lungs. The continued use of this pronolateral method is said to be an excellent mode of keeping the pharynx clear of obstruction.

The artificial respiration process is far away the most important thing to attend to first. Not an instant should be lost before it is commenced.

If there be other assistants besides sufficient to keep up this process steadily and persistently for hours (for vitality has been restored after *more than two hours* of apparently fruitless effort) wet clothing may be removed, the body rolled unto warm blankets and partly wrapped in them, and heat applied to the groins, feet and over the stomach, by means of hot water in bottles or woollen cloths. A very hot cloth applied suddenly and momentarily to the bare skin over the heart might help to restore its action, or an occasional sharp slap or two with the hand over this region might have a like effect.

When breathing is restored, but little usually remains to be done. A little hot drink or mild stimulant may be required, with dryness, warmth and quiet rest.

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THE INFLUENCE OF TOBACCO ON GASTRIC DIGESTION.

Dr. J. Ydan-Pouchkine reports a number of experiments which he has made in this connection on seven healthy individuals who were not habituated to tobacco-smoking. (*Bul. Général de Thérapeu.* Feb. 1891. *Therap. Gaz.*) His conclusions are embraced in the following statements: 1. Tobacco increases the quantity of gastric juice, but diminishes its acidity. 2. The quantity of free hydrochloric acid of the gastric juice is diminished under the influence of tobacco. 3. Proportionately to the decrease of the amount of hydrochloric acid there is an equal diminution of the digestive power of the gastric juice. 4. Tobacco likewise slows the action of the gastric ferments. 5. These modifications in the gastric juice produced by tobacco last for a period of several days. 6. As regards the motility of the stomach and its power of absorption, tobacco seems to produce an increase of these functions.