

of the mitral valve and that the heart was weak and flabby. The stomach contained undigested food and was distended. A verdict of death from syncope, weak heart and indigestion from excessive tea-drinking was returned by the coroner's jury. It is a wonder that the brand of tea was not mentioned. The impression left by this verdict is that the tannin in tea, acting on the meat in the stomach of the deceased, was largely responsible for his death. It is true that the tannin in tea (12.88-17.80 per cent.) toughens meat and makes its digestion slow; but this chemical reaction does not produce sudden death in the millions of people who drink tea and eat meat at the same meal in Europe and America, not to speak of other continents. The fatal result in the case of the London window-cleaner was mainly due to a distended and dilated stomach, causing mechanical embarrassment to a weak and flabby heart, which was provided with a thickened mitral valve. In an elderly person with such cardiac characteristics, flatulent distention of the stomach from the eating of turnips or cabbage would be dangerous to life. Had the window-cleaner's heart been sound he might have gone on eating boiled beef and drinking tea at the same meal for many a year.

The Treatment of Alcoholism in Psychiatric Hospitals.—

The beer-drinking Bavarians are much beholden to Dr. Kraepelin, who in the psychiatric hospital at Munich treats a large number of cases of alcoholic addiction. In a printed abstract of a report recently presented to the Ontario Government, it is said that 39 1-2 per cent. of all the patients treated at the Munich psychiatric hospital in 1905 were alcoholics. These unfortunates are taken directly to that hospital by the police and this applies to "ordinary drunks," as well as victims of chronic alcoholic poisoning. The practical results are said to be satisfactory; but, before recognizing any novel force in Dr. Kraepelin's treatment of alcoholism, one should learn the percentage of relapses. Every physician knows that alcoholic patients can be much improved, at least for a time, many of them abstaining rigidly for a short period, only to return with increased zest to the old addiction. In private practice a physician is hampered in his efforts to control a case of confirmed alcoholism. If an alcoholic patient is anxious to be cured of his bad habit, if his table is well