

Blundell said could be usefully inscribed on one of the blades of the obstetric forceps: *Arte, non vi.*

In all cases where there is an offensive vaginal discharge, or any erosion or ulceration of the vaginal walls, antiseptic injections should precede, and for some time follow, the removal of the foreign body.—*Phil. Med. & Surg. Reporter.*

THE INFLUENCE OF HIGH ALTITUDES UPON PULMONARY CONSUMPTION.

Dr. Irving M. Snow thus writes in the *N. Y. Med. Jour.*, June 13: The treatment of pulmonary consumption has, at all times, been unsatisfactory to the physician, by reason of the certain and often rapid progress of the disease to a fatal termination. The disease is, indeed, often palliated by medical skill, but relief is usually only temporary, and life is rarely prolonged more than three years. During an experience of thirty-eight years, Dr Austin Flint states that he has seen but seventy-five cases in which an arrest of the disease took place, and in most of these the improvement was for a short time. Every physician is called upon to examine and advise the victims of consumption. It is a disease in which the doctor is early and frequently consulted, yet one-seventh of all deaths are yearly attributed to this cause in the United States, and in Maine 50 per cent. of all deaths between twenty and forty years are from consumption.

From the failure of the materia medica to cope with this disease, attention has been drawn to the modifying influence of climate upon chronic pulmonary disorders. The conditions of soil and atmosphere favorable to the development of phthisis pulmonalis are well known. Damp, ill-drained land, cold, humid air, sudden changes of temperature, lack of sunlight, anti-hygienic surroundings—all contribute to depress the general health and to occasion the fearful prevalence of consumption in low-lying districts and in large cities. It is, therefore, evident that, in the search for a climate for the prevention or cure of consumption, dryness of air and soil and the invigorating influences of sunlight must be substituted, for the deleterious conditions of ground and atmosphere mentioned above. That climate is a potent agent in the prevention of phthisis pulmonalis is demonstrated by the fact that a region of comparative immunity from the disease is found in high altitudes. Consumption is excessively rare among the native population of New Mexico; and it is stated by Dr. Archibald Smith to be an exotic in the Peruvian Andes at an elevation of 6,500 feet. Kuchenmeister and Lombard have estimated the altitude of approximate immunity in Switzerland at 4,000 feet, and at the Equator 9,000 feet. Dr. Herman Weber, an unquestioned authority on medical climatology, has also testified to the rarity of phthisis upon elevated table-lands. We may also see the influence of altitude in our own country; that while the mortality in New York city is 20 per

cent., at an elevation of 2,000 feet above the sea, only 10 per cent. of all deaths are attributed to pulmonary consumption.

In America Dr. Denison, of Denver, has placed the altitude of comparative immunity from phthisis at 6,000 feet, and quotes the vital statistics of Denver, which, in four years and a half, show but fourteen deaths from consumption originating in the State, two of which were acknowledged by the attending physicians to have originated elsewhere. The analysis of the conditions of climate found in this area of so-called immunity in Colorado becomes an interesting study.

As the traveler passes from eastern to western Kansas toward the Rocky Mountains the landscape gradually changes. In place of luxuriant vegetation, vast cornfields, and numerous streams, the prairie becomes parched and arid, the water-courses waste to dryness, and the whole prospect shows the absence of rain. This difference can be appreciated when we learn that the annual precipitation of rain and melted snow at Denver, 5,300 feet above the sea, is 14.77 inches as compared with New York, where it is 42.70 inches a year. This dryness is favored by the loose, sandy nature of the soil, which absorbs and radiates heat and moisture far more rapidly than impermeable rock or clay. Constant humidity of earth and air predisposes most strongly to the development of phthisis and other pulmonary disorders, while dryness of soil and atmosphere gives to the inhabitant of high plateaux comparative exemption from disorders of the respiratory tract. Laennec mentions a locality where the dampness of the soil was of such a character, that two-thirds of the resident population died of phthisis. Variations of temperature are less acutely felt in dry than in moist climates, where cold is bitterer and heat more oppressive. The sun is obscured and hampered along seas and rivers by a veil of cloud or mist, but when we reach the plains of Colorado the atmosphere is of a silver clearness, and those who have felt the exhilaration and comfort afforded by the sunlight of Colorado will appreciate the increased power of the atmosphere in transmitting radiant heat. There is found to be an average difference of 43° between sun and shade in Colorado as compared with Washington, where the difference is 23°. A general rule is given by Dr. Denison that "there is a difference of 1° between sun and shade for each rise of 235 feet." This in part explains the enormous diurnal variation of temperature complained of by Dr. Alfred L. Loomis. The physiological effect of light is to stimulate respiration, as is demonstrated by the observations of Bidder and Schmidt, who, finding that animals at rest exhaled more carbon dioxide by day than by night, equalized the elimination of carbon dioxide by depriving the animals of light. To the consumptive, whose hope of life depends upon the amount of sunlight and outdoor exercise he can obtain, the value of a climate like that of Colorado may be appreciated when we contrast its 320 sunny days annually with Boston, where one-third of the year is cloudy.