thetic purposes the rational method would be to employ a gasometer and to administer less than 10 per cent. of the anesthetic. The solution should not be poured into the instrument between the face-piece and the bag, but should be allowed to mingle with the air by being introduced at the end of the bag.—New York Medical Journal.

## Typhoid Fever and Modern Treatment.

Good elimination should be maintained from every gland and emunctory, writes W. T. Marrs, of Peoria Heights, Ill. Every secretion should be aroused and made to do its best. Calomel in small doses is one of our best remedies. are nearly always indicated. Abbott's saline laxative is pleasanter and better than crude salts. He has observed that if the bowels act not less than twice daily, the course and severity of the disease is modified. The old idea that in typhoid the bowels should be kept confined for a few days at a time is now looked upon as having been an untenable theory. The more debris and toxins are eliminated, the less will the disease be compelled to oxidize by the process of fever. The more water the patient drinks, the more are poisons eliminated or diluted, thus lessening their absorption. In case of hyperpyrexia, give a colonic flushing and the high temperature usually comes down a degree or two. The sulphocarbolates (W-A Intestinal Antiseptics) should be given to neutralize remaining foci of infection. Patients treated along this line seldom require the cold bath. Tepid spongings at frequent intervals usually serve a better purpose than the bath of low temperature.— Mercle's Archives.

## Brachial Neuralgia.

Dr. Tilmann (Ebstein-Schwalbe, Chir. des prakt. Aerztes). Neuralgia of the arm is generally the result of traumatism of the brachial plexus, due to traction and forcible extersion of the arm as a whole. The nerve which is chiefly involved may be identified by the boundary lines of the hyperesthetic or hypoesthetic skin areas. A further important part is played by diseases of the spinal column, overexertion, perineuritis, tumors of the nerves, the supraclavicular fossa and the cervical ribs, as well as by disease of the bones of the arm. Other factors entering into consideration are all those conditions which involve a lowering of the scapular girdle on one side, or a slight lengthening of the upper extremity, such as, for instance, paralysis of the deltoid muscle and stretching of the